

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35987

FILED  
Apr 25, 2012  
Secretary of State

**Entity Name:** MYKONOS COURT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O SPLENDID PROPERTY MANAGEMENT  
3911 HOLLYWOOD BLVD STE 103  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

C/O ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH  
LAKE WORTH, FL 3361 US

**Current Mailing Address:**

C/O SPLENDID PROPERTY MANAGEMENT  
3911 HOLLYWOOD BLVD STE 103  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

C/O ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461 US

**FEI Number:** 65-0219412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID COVEN PA  
2856 EAST OAKLAND PARK BOULEVARD  
FORT LAUDERDALE, FL 33306 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: WILLIAMS, TEMPLE  
Address: 3755 MYKONOS COURT  
City-St-Zip: BOCA RATON, FL 33487

Title: S  
Name: SCOPE, GAIL  
Address: 3660 MYKONOS COURT  
City-St-Zip: BOCA RATON, FL 33487

Title: P  
Name: LEIS, JANICE  
Address: 3684 MYKONOS COURT  
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN MCENTEE

APM

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date