

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000003861

FILED
Nov 05, 2008
Secretary of State

Entity Name: BOYNTON CENTER NO. 2 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

305 E OCEAN AVE
204
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

305 E OCEAN AVE
204
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 59-1508295 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SHANK, JANIS
305 E OCEAN AVE
204
BOYNTON BEACH, FL 33435 US

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: JANIS SHANK

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KUIPER, RYAN
Address: 305 E OCEAN AVE # 103
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VPD () Delete
Name: MCFERREN, ROBERT
Address: 901 NW 6TH AVE
City-St-Zip: BOCA RATON, FL 334322524

Title: SD () Delete
Name: SHANK, JANIS
Address: 305 E OCEAN AVE # 204
City-St-Zip: BOYNTON BEACH, FL 334354437

Title: TD () Delete
Name: WELLMAN, LISA
Address: 130 W OCEAN AVE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D () Delete
Name: BRAY, CYNTHIA
Address: 7567 BRUNSON DR
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANIS SHANK

SD

11/05/2008

Electronic Signature of Signing Officer or Director

Date