
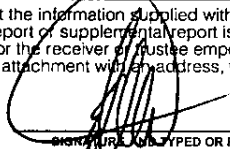


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-21-2006 90029 007 \*\*\*\*61.25

<b>DOCUMENT # N98000004634</b> 1. Entity Name <b>THE COLONY AT BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>CAMS 314 NE 3RD STREET BOYNTON BEACH, FL 33435</b>			Mailing Address <b>CAMS 314 NE 3RD STREET BOYNTON BEACH, FL 33435</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>22-3649132</b>	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required			
6- Name and Address of Current Registered Agent  <b>SACHSAX &amp; KLEIN 301 YAMATO RD SUITE 4150 BOCA RATON, FL 33431</b>				7: Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ETCHELLS, EDWARD JR 7836 COLONY LAKE DR BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S O'NEILL, NATALIE 7507 COLONY PALM DR BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PATERNOSTER, RAPHAELLA 7572 COLONY LAKE DR BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARILLO, JOE 7542 COLONY LAKE DR BOYNTON BEACH, FL 33436	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOGILEVSKY, ANDRE 7643 COLONY LAKE DR BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AMANATIAN, SHAWNA 7620 COLONY LAKE DR BOYNTON BEACH, FL 33436	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEE <b>TABITHA MacGowan</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>7781 Colony Drive Boynton Beach, FL 33436</b>				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Rick Mayer V.P.</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>7694 Colony Palm Drive Boynton Beach, FL 33436</b>				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <b>Edward A. Etchells Jr. - President</b> <span style="float: right;"><b>3/14/06</b></span>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					