

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002158

FILED  
Apr 28, 2012  
Secretary of State

Entity Name: MONTECITO PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O LANG MANAGEMENT  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LANG MANAGEMENT  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 65-0925170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ISAACSON, WILLIAM K  
LANG MANAGEMENT COMPANY INC.  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 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: PD  
Name: CANTER, ARTHUR  
Address: 7813 MONTECITO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: TD  
Name: GOLDBAUM, ARTHUR  
Address: 7869 MONTECITO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: VP  
Name: BOYARSKI, JOEL  
Address: 7741 MONTECITO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: D  
Name: MORENSTEIN, ROBERT  
Address: 7845 MONTECITO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: S  
Name: KLEIN, BOB  
Address: 7716 MONTECITO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

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: JOEL BOYARSKI

VP

04/28/2012

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

\_\_\_\_\_  
Date