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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 19 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000043901 (4)

BOYNTON WATERS VILLAS CORPORATION

Principal Place of Business Mailing Address 4950 NORTH DIXIE HIGHWAY 4950 NORTH DIXIE HIGHWAY SUITE A SUITE A FORT LAUDERDALE FL 33334 FORT LAUDERDALE FL 33334-3947 3. Date Incorporated or Qualified 3a. Date of Last Report 06/07/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0747755 APPLIED FOR 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional M Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution 23 Added to Fees Zip Country Zıp Country 8. This corporation has liability for intangible tax under s. 199.032, Yes X No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KENNELLY, JOHN S. ESQ. **4950 NORTH DIXIE HIGHWAY** 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE A** 83 'FORT LAUDERDALE FL 33334 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulred when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE KENNELLY, JOHN B NAME 1.2 NAME 4950 N. DIXIE HIGHWAY, SUITE A STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33334 CITY-ST-ZIP 1.4 CHY-ST-ZIP Change DELETÉ TITLE 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS **33 STREET ADDRESS** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP ... DELETE ☐ Change ■ Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on an attachment with an address.