## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22923

Entity Name: THE COURTS AT BOYNTON PLACE SUB-ASSOCIATION, INC.

**FILED** Apr 04, 2017 **Secretary of State** CC7898945936

## **Current Principal Place of Business:**

C/O CAROLINA MANAGEMENT SERVICES, INC. 3447 HIGH RIDGE ROAD BOYNTON BEACH, FL 33426

## **Current Mailing Address:**

C/O CAROLINA MANAGEMENT SERVICES, INC. P.O. BOX 740425 BOYNTON BEACH, FL 33474 US

FEI Number: 65-0035421 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KONYK & LEMME, PLLC 777 S. FLAGLER DRIVE SUITE 800-WEST TOWER WEST PALM BEACH, FL 33401 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: CHELLE KONYK 04/04/2017

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** 

Name LIPSKY, ELIZABETH Name SANTORSOLA, CLARINA

P.O. BOX 740425 P.O. BOX 740425 Address Address

City-State-Zip: **BOYNTON BEACH FL 33474** City-State-Zip: **BOYNTON BEACH FL 33474** 

Title VΡ Title **SECRETARY** 

Name BURGOS, MARGARET DORVIL, JEAN Name

Address P.O. BOX 740425 Address P.O. BOX 740425

City-State-Zip: BOYNTON BEACH FL 33474 City-State-Zip: **BOYNTON BEACH FL 33474** 

Title DIRECTOR

Name WARD, RICHARD Address P.O. BOX 740425

City-State-Zip: **BOYNTON BEACH FL 33474** 

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.

**PRESIDENT**