

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22923

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

**FILED**  
**Apr 01, 2016**  
**Secretary of State**  
**CC4632544935**

**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.  
3447 HIGH RIDGE ROAD  
BOYNTON BEACH, FL 33426 US

**FEI Number: 65-0035421**

**Certificate of Status Desired: No**

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

KONYK & LEMME, PLLC  
824 WEST INDIANTOWN ROAD  
JUPITER, FL 33458 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**

**04/01/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LIPSKY, ELIZABETH  
Address        P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            SECRETARY  
Name            SANTORSOLA, CLARINA  
Address        P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            TREASURER  
Name            TULLY, RICK  
Address        P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            VP  
Name            WINTERS, DWAYNE  
Address        P.O. BOX 740425  
City-State-Zip: BOYNTON BEACH FL 33474

Title            DIRECTOR  
Name            MCCALLA, TONY  
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.*

**SIGNATURE: ELIZABETH LIPSKY**

**PRESIDENT**

**04/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date