

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48671

**Entity Name:** BOYNTON WATERS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**9390 JOG ROAD  
BOYNTON BEACH, FL 33437**Current Mailing Address:**PO BOX 740065  
BOYNTON BEACH, FL 33474**FEI Number:** 65-0421319**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HALMO, MARK  
9356 LAKESIDE LN  
BOYNTON BEACH, FL 33437 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	D
Name	DUCKMAN, SANFORD
Address	PO BOX 740065
City-State-Zip:	BOYNTON BEACH FL 33474

Title	SD
Name	DELPOPOLO, LINDA
Address	9284 LAKESIDE LN
City-State-Zip:	BOYNTON BEACH FL 33437

Title	TD
Name	GALVIN, ROBERT
Address	9313 WATER COURSE WAY
City-State-Zip:	BOYNTON BEACH FL 33437

Title	PD
Name	HALMO, MARK
Address	9356 LAKESIDE LN
City-State-Zip:	BOYNTON BEACH FL 33437

Title	VD
Name	BRANDRUP, CLAUS
Address	9369 CASCADE COURT
City-State-Zip:	BOYNTON BEACH FL 33437

Title	D
Name	HANSEN, MICHAEL
Address	9337 WATER COURSE WAY
City-State-Zip:	BOYNTON BEACH FL 33437

*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:** LINDA DELPOPOLO**SECRETARY****03/22/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date