2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Feb 20, 2007 8:00 am **DOCUMENT # 729378 Secretary of State** 1. Entity Name 02-20-2007 90058 015 ****61.25 THE TRELLISES ASSOCIATION, INC. Principal Place of Business Mailing Address 9731 N. NEW RIVER CANAL ROAD PLANTATION FL 33324-3419 9731 N. NEW RIVER CANAL ROAD PLANTATION FL 33324-3419 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-1655424 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name POLIAKAFF, GARY A BECKER & POLIAKOFF, P.A. Street Address (P.O. Box Number is Not Acceptable) 3111 STIRLING ROAD FT. LAUDERDALE FL 33312 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rehistating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PRESIDENT STEPHANIE SCHEINMAN Delete Change HILL ☐ Addition NAME SMITH, WILLIAM NAME 9703 N. NEW RIVER CAWAL RD,, #102 STREET ADDRESS STREET ADDRESS 9709 N NEW RIVER CANAL RD 206 CITY-ST-7IP CITY ST ZIP PLANTATION FL 33324 PLANTATION, FL 33324 VICE-PRESIDENT TITLE Delete DV THE Change Addition MARY ANN MOSELEY NAMi NAME COATS, BILL 956 MOCKINGBIRD LN., #503 STREET ADDRESS 952 MOCKINGBIRD LANE #602 STREET ADORESS CHY-SI-7IP PLANTATION FL 33324 CHY-S1-7IP PLANTATION, FL 33324 Delete SECRETARY TITLE T)]! F DS ☐ Addition JULIE BEHAR NAME NAM FREEDMAN, HELEN 954 MOCKINGBIRD IN., #5-16 STREET ADDRESS 958 HOCKINGBIRD LN 515 STREET ADDRESS CITY - S1-7IP CITY+ST 7IP PLANTATION, FL 33324 PLANTATION FL 33324 TREASURER Delete TITLE ☐ Addition DS HOWARD KLOOR NAME NAME DANIELS, ROBIN 960 MOCKINGBIRD KN., #622 STREET ADDRESS 9725 NORTH NEW RIVER CANAL ROAD #423 STREET ADDRESS CHY ST-7P PLANTATION, FL 33324 PLANTATION FL 33324 CHY-ST 7IP Delete DIRECTOR TITLE ви ☐ Change Addition EILEEN METZGER NAME SCHWARTZ, RONALD J 9701 N NAME 9725 N. NEW RIVER CANAL RD, STREET ADDRESS 9727 N NEW RIVER CANAL RD 109 STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33324 CITY-ST ZIP PLANTATION, FL 33324 DIRECTOR HILE D P Delete TITLE ☐ Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

DONNA WILLIAMS

9715 N. NEW RIVER CANAL RD,

PLANTATION, FL 333Q4

GOLDBERG, MARTIN

PLANTATION FL 33324

9727 N NEW RIVER CANAL RD 629

NAMI

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Mary and Mareley, Vice Pres,
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OF DIRECTOR