2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 18, 2008 8:00 am Secretary of State

03-18-2008 90010 030 ****61.25

1. Entity Name	MENT #733601 Ental village condomi				08 90010 030 ****6	1.25	
1402 N.W. 80TH AVE. 541 APT 111 SUN		Mailing Address 541 SOUTH STRO 7 SUITE 12 MARGALE, FL 33068 US	SAT SOUTH STAD 7 SUINE 12			1100 B100 G1B1 B101 B101 B101 B101 B101	NE
		3. Mailing Address	ailing Address 102 N W PDT AVE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc. APT \		Chg-NP	CR2E037 (12/06)	<u> </u>
City & State M		MARGATE FL	ARBATE, IL)5902	No	plied For t Applicable
Zip	Country	33063-2974 RL	Country <u>ら</u> ね		of Status Desired	\$8.75 Add Fee Required Registered Agent	
	6. Name and Address of Current F	Registered Agent	Name	/. Name ara	Address of New		
ABSOLUTE PROPERTY MANAGEMENT 541 SOUTH ST RD 7 SUITE 12 MARGATE, Pt. 33088			Name CONTIN ENTAL VILLAGE CONDO. ASSN. Street Address (P.O. Box Number is Not Acceptable) 1402 N W 80 TH AVE				
	" A south		City	RGATE		FL Zip Code	
	named entity submits this statement for ions of registered agent.	r the purpose of changing its regis	stered office or	registered agent, or be	oth, in the State of	Florida. I am (amiliar with,	and accept
SIGNATURE -							
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Regis	stered Agent signatur	re required when reinstating)		OATE	
	Signature, typed or printed name of registered agent a Filling Fee is \$61.25 Due by May 1, 2008	9. Election Campaig Trust Fund Contrib	gn Financing	\$5.00 May Added to Fee:		Make check payable to	
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	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaig Trust Fund Contrib	gn Financing bution, [\$5.00 May Added to Fee	s FI	Make check payable to orida Department of Si	ate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 in Block 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered.

SIGNATURE: _

Dedice E. J. BUDNIK
MENATURE AND TYPED OR PRINTED HAME OF BIGHING OFFICER OR DIRECTOR