

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2008 8:00 am
Secretary of State

05-08-2008 90101 001 15,496.25

DOCUMENT # 739045
 1. Entity Name
NEWPORT "V" CONDOMINIUM ASSOCIATION, INC.



00011071



Principal Place of Business
 C/O COOCVE
 3501 WEST DRIVE
 DEERFIELD BEACH, FL 33442-2085

Mailing Address
 C/O COOCVE
 3501 WEST DRIVE
 DEERFIELD BEACH, FL 33442-2085

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02112008 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
 59-1928464

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CONDOMINIUM OWNERS ORGANIZATION
 3501 WEST DRIVE
 DEERFIELD BEACH, FL 33442-2085

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME PARNES, BARBARA Delete
 STREET ADDRESS 325 NEWPORT V
 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE VPD
 NAME DAVID Lowe Change Addition
 STREET ADDRESS 318 Newport V.
 CITY-ST-ZIP D.B # 33442

TITLE VD Delete
 NAME KOPELS, PETER
 STREET ADDRESS 335 NEWPORT V
 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE TS
 NAME Bill Dellinger Change Addition
 STREET ADDRESS 410 South Powerline Rd.
 CITY-ST-ZIP D.B # 33442

TITLE T Delete
 NAME DELLINGER, BILL
 STREET ADDRESS 313 NEWPORT V
 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE D
 NAME Charles FLAXMAN Change Addition
 STREET ADDRESS 321 Newport V.
 CITY-ST-ZIP D.B # 33442

TITLE SD Delete
 NAME CONSIDINE, JOAN
 STREET ADDRESS 327 NEWPORT V
 CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

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 attachment with an address, with all other like empowered.

SIGNATURE: Barbara Parnes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/08 (954) 360-9751
Date Daytime Phone #

BARBARA PARNES