2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

STREET ADDRESS

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NAME

TAMARAC FL 33321

FROLICK, To J y

8750 HOLLY COURT

TAMARAC FL 33321

Feb 16, 2006 8:00 am Secretary of State **DOCUMENT # 740587** 1. Entity Name 02-16-2006 90049 030 ****61.25 HOLLY COURT AT WOODMONT, A CONDOMINIUM ASSOCIATION, INC., A FLORIDA NON-PROFIT Principal Place of Business Mailing Address OFFICE-POOLSIDE OFFICE-POOLSIDE 8795 HOLLY COURT TAMARAC FL 33321 8795 HOLLY COURT TAMARAC FL 33321 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/05) _ Applied For City & State City & State 4. FEI Number 59-1891340 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FEINBERG, LAWRENCE Street Address (P.O. Box Number is Not Acceptable) 8770 HOLLY CT #6-201 TAMARAC FL 33321 $(\mathbf{7},\mathbf{2}_k)_{i=1,\ldots,k}$ City Zip Code FL ę .. 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 photod name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to ... \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Delete TITLE ☐ Change Addition LEFF, PHILIP NAME NAME 8760 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FEINBERG, LAWRENCE NAME NAME 8770 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP . Delete .. TITLE TITLE - Change ---- - Addition -BERMANN, MABORIG BEZMAN, HAZOLO NAME NAME STREET ADDRESS 8791 HOLLY COURT STREET ADDRESS CITY - ST - ZIP TAMARAC FL 33321 CITY-ST-ZIP TITLE D Delete TITLE ☐ Change ☐ Addition LEVINE, ROSALYN NAME NAME STREET ADDRESS 8799 HOLLY COURT STREET ADDRESS CITY-ST-ZIP TAMARAC FL 32321 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition LAZAR, S. NAME NAME 8780 HOLLY CORT STREET ADDRESS

FILED

□ 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 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.

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

AUDEN/17 Fr. 10+41- 1/14/06 964 716-1797