

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90020 014 ****61.25

DOCUMENT # 741836

1. Entity Name
THORNHILL HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business
**P O BOX 2192
 BOCA RATON, FL 33427**

Mailing Address
**P O BOX 2192
 BOCA RATON, FL 33427**

400333



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1884438

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

7. Name and Address of New Registered Agent

**SILVERMAN, BARBARA
 22260 MORNING GLORY TERRACE
 BOCA RATON, FL 33433**

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

**Filing Fee is \$61.25
 Due by May 1, 2006**

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	D	<input type="checkbox"/> Delete
NAME	G FREDERICK KUHN	
STREET ADDRESS	22154 TRILLIUM WAY	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	DT	<input type="checkbox"/> Delete
NAME	FRANK R GUY	
STREET ADDRESS	22167 TRILLIUM WAY	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	SD	<input type="checkbox"/> Delete
NAME	DICKLER, EUNICE	
STREET ADDRESS	22233 LARKSPUR TRL	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RABINOWITZ, LOWELL R	
STREET ADDRESS	22260 LARKSPUR TRAIL	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALAN FISHER	
STREET ADDRESS	22221 HOLLYHOCK TRAIL	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WOLFF, ROBERT	
STREET ADDRESS	22245 ALYSSUM WAY	
CITY-ST-ZIP	BOCA RATON, FL 33433	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Berger, Alan	
STREET ADDRESS	22169 Larkspur Trail	
CITY-ST-ZIP	Boca Raton, FL 33433	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Golish, Glen R.	
STREET ADDRESS	22261 Hollyhock Trail	
CITY-ST-ZIP	Boca Raton, FL 33433	

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: Frank R. Guy **FRANK R. GUY, TREASURER**

3-27-06

56-392-1198

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

40041687

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DOCUMENT#741836

THORNHILL GREEN HOMEOWNER'S ASSOCIATION, INC.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Addition
NAME	SMALL, RABBI LEONARD	
STREET ADDRESS	22139 LARKSPUR TRAIL	
CITY-ST-ZIP	BOCA RATON, FL 34333	
TITLE	D	<input checked="" type="checkbox"/> Addition
NAME	PETROVER, DEBRA	
STREET ADDRESS	22188 LARKSPUR TRAIL	
CITY-ST-ZIP	BOCA RATON, FL 34333	
TITLE	PD	<input checked="" type="checkbox"/> Addition
NAME	SILVERMAN, BARBARA	
STREET ADDRESS	22260 MORNING GLORY TERRACE	
CITY-ST-ZIP	BOCA RATON, FL 34333	