2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#745999

FILED Apr 03, 2006 Secretary of State

Entity Name: POM-TOR TOWNHOUSES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3240 NE 11TH ST

POMPANO BEACH, FL 33062

Current Mailing Address: New Mailing Address:

1220 MIAMI ROAD SUITE #6

FT. LAUDERDALE, FL 33316

FEI Number: 59-2005484 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHOOP, THOMAS V 1220 MIAMI ROAD #6

FT LAUDERDALE, FL 33316 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PITTLEMAN, SHELDON Name: EGER, JOSEPH

 Name:
 PTITLEMAN, SHELDON
 Name:
 EGER, JOSEPH

 Address:
 3244 NE 11TH ST #106
 Address:
 3244 NE 11TH ST #205

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:
 POMPANO BEACH, FL 33062

Title: VD () Delete Title: SD (X) Change () Addition

 Name:
 EGER, JOSEPH
 Name:
 JAOUHARD, NADER

 Address:
 32040 NE 11 ST #205
 32040 NE 11 ST #201

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:
 POMPANO BEACH, FL 33062

Title: D () Delete Title: () Change () Addition

 Name:
 CIVITANO, FRANK
 Name:

 Address:
 3244 NE 11 ST #105
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH EGER PD 04/03/2006