

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746690

FILED
Apr 10, 2006
Secretary of State

Entity Name: ANTIGUA VILLAGE I "D" CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1310 AVENUE OF THE STARS
COCONUT CREEK, FL 33066 US

New Principal Place of Business:

Current Mailing Address:

1310 AVENUE OF THE STARS
COCONUT CREEK, FL 33066 US

New Mailing Address:

FEI Number: 59-1877206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

BRUCE BANDLER
1310 AVENUE OF THE STARS
COCONUT CREEK, FL 33066 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: BRUCE BANDLER 04/10/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHLUSSEL, JACK
Address: 2502 ANTIGUA TERRACE, APT H-4
City-St-Zip: COCONUT CREEK, FL 33066

Title: VPD () Delete
Name: KAPLAN, MARY
Address: 2502 ANTIGUA TERRACE APT A-4
City-St-Zip: COCONUT CREEK, FL

Title: SD () Delete
Name: DOBBS, SAM
Address: 2502 ANTIGUA TERRACE APT. L-4
City-St-Zip: COCONUT CREEK, FL 33066

Title: TD () Delete
Name: STERMAN, EVELYNE
Address: 2502 ANTIGUA TERRACE APT. H-3
City-St-Zip: COCONUT CREEK, FL 33066

Title: VPD () Delete
Name: KELLY, CHRISTINE
Address: 2502 ANTIGUA TERRACE, APT L-2
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JACK SCHLUSSEL P 04/10/2006

Electronic Signature of Signing Officer or Director Date