

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State 02-11-2008 90054 042 ****61.25

| 1. Entity Name ABBEY PARK HOMEOWNERS' ASSOCIATION, INC. | | | | | | | | 02-11-2006 | , 20034 0 | 42 0 | 11.23 |
|---|--|-------------------------------------|--|----------------------------------|---------------|---|--------------------------------|--|----------------|----------------------------|-----------------------------|
| 1849 ABBE | ce of Business Y ROAD, #14A BEACH, FL 33415 | P.O. | Mailing Address P.O. BOX 5509 LAKE WORTH, FL 33466 | | | | | | | | |
| 2. Principal F | Place of Business - No P.O. Box | | 3. Mailing Address 4000 5.57 THAVE. | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 01152008 | Chg-NP | CR2E0 | 37 (12/06) | |
| City & State | | | City & State LAKE WONN | | | | 4. FEI Number 65-03162 | .98 | | \ | pplied For ot Applicable |
| Zip | Country | | 463 | Cour | ntry | | 5. Certificate of | | | \$8.75 Ad Fee Require | |
| -, - | _ 6. Name and Address of C | urrent Registere | d Agent | | Name | | 7. Name and Ac | Idress of New | Registered | Agent | |
| DICKER, I | EDWARD ER, KRIVOK & STOLOFF | | | | | Name Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | TRALIAN AVENUE SOUT LM BEACH, FL 33409 | TH, STE 400 | ΓΕ 400 | | | | | | | | |
| | | | | | City | | | | FL | Zip Cod | |
| | e named entity submits this stater tions of registered agent. | ment for the purp | ose of changing its | s registere | d office or | register | ed agent, or both, | in the State of F | lorida. I am | familiar with, | , and accept |
| SIGNATURE | • | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of register | ed agent and title if app | licable. (NOT | TE: Registered | Agent signati | re required | when reinstating) | <u>, </u> | DATE | | |
| | Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Car Trust Fund (| | | | \$5.00 May Be Added to Fees | | | k payable t rtment of S | |
| 10. | | ND DIRECTORS | | 11. | | _ | ADDITIONS/CHAN | GES TO OFFIC | ERS AND DI | RECTORS IN | V 10 |
| NAME STREET ADDRESS CITY-ST-ZIP | P DARAH, HANNAH 1883 ABBEY RD 22A WEST PALM BEACH, FL | 33415 | Delete | | | HAA 1883 | INNO, ST ST PACM | ARA K RD. REMIL | RI - | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST SINOT, WAYNE 1849 ABBEY ROAD 14A WEST PALM BEACH, FL | 33415 | Delete | | | | 2 , 1, 1, 1, 1, 1 | | , v | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS | VP POPOVICH, ALTHEA 1899 ABBET PARK WEST PALM BEACH, FL | <u>-</u> . | ☐ Delete | TITLE NAME STREE CITY-1 | 1 Adoress - | | | | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCELWEE, WILLIAM 1887 ABBEY ROAD 23A WEST PALM BEACH, FL | | ☐ Delete | TITLE | T ADDRESS | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S. HANNAH, SARAH 1883 ABBEY ROAD 22A WEST PALM BEACH, FL | | Delete | TITLE NAME STREE CITY- | T ADORESS | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | | | | ☐ Change | ☐ Addition |
| indicated of the co | Certify that the information suppli d on this report or supplemental r rporation or the receiver or truste , or on an attachment with an ad | eport is true and e empowered to | accurate and that execute this report | my signatu t as require | ire shall h | ave the s | same legal effect a | s if made under | roath; that I | am an office | r or director |