

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750686

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** THE CIRCLE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2599 NW 56TH AVE  
LAUDERHILL, FL 33313 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 190191  
FT LAUDERDALE, FL 33319 US

**New Mailing Address:**

**FEI Number:** 59-2267868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHOHENFELD, DAVID  
7520 NW 5 ST  
#203  
PLANTATION, FL 33317 US

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

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:**

Title: P ( ) Delete  
Name: GERZINA, JACK  
Address: 7363 WEBORD TERR.  
City-St-Zip: BOCA RATON, FL

Title: VP ( ) Delete  
Name: GLOVER, CHARLES W  
Address: 500 S OCAEN DRIVE #308  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: ST (X) Delete  
Name: GLOVER, CHARLES S  
Address: 2421 NW 30 ST  
City-St-Zip: BOCA RATON, FL 33431

Title: VP (X) Delete  
Name: ST PREUX, FAROULE  
Address: 8200 SW 4 PL  
City-St-Zip: MARGATE, FL 33068

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: STEPHENSON, MARK  
Address: 2183 N. POWERLINE RD. #1  
City-St-Zip: POMPANO BEACH, FL 33069

Title: DT (X) Change ( ) Addition  
Name: BENZAKEN, MEIR  
Address: 1985 S. OCEAN DR. #2J  
City-St-Zip: HALLANDALE, FL 33009

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 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: MARK STEPHENSON

DP

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date