

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751486

FILED
Apr 27, 2006
Secretary of State

Entity Name: STRATHMORE GATE -I HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

230 STRATHMORE GATE DR.
ROYAL PALM BEACH, FL 334111640

New Principal Place of Business:

Current Mailing Address:

230 STRATHMORE GATE DR.
ROYAL PALM BEACH, FL 334111640

New Mailing Address:

FEI Number: 59-2021761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECKLER, ALBERT
7 BAY CEDAR COURT
ROYAL PALM BEACH, FL 33411 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: PD () Delete
Name: PECKLER, ALBERT
Address: 7 BAY CEDAR COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TD () Delete
Name: ROSENBERG, SEYMOUR,
Address: 60 CANDLENUT CT.
City-St-Zip: ROYAL PALM BCH, FL 00000,

Title: SD () Delete
Name: SPIEGEL, FRANCIS
Address: 95 ROSES BAY CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VD () Delete
Name: FINNIE, ROBERT
Address: 225 THORNAPPLE COURT
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: KATZ, STAN
Address: 25 BLACK BIRCH CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: SHAPIRO, SYLVIA
Address: 190 MASTIC TREE CT
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: SPIEGEL, FRANCIS
Address: 95 ROSE BAY CT
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: CAMBRA, RONALD
Address: 152 PINTO PALM CT
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VD (X) Change () Addition
Name: KATZ, STAN
Address: 25 BLACK BIRCH CT
City-St-Zip: WEST PALM BEACH, FL 33411

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: ALBERT PECKLER

PD

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date