

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 751501 1. Entity Name CONDOMINIUM "A" ASSOCIATION AT SHERWOOD SQUARE, INC.						FILED 06 JUN 19 PM 12: 59 SECRETARY OF STATE TALLAHASSEE, FLORIDA 			
Principal Place of Business SQUARE, INC. 1155 RIVERSIDE DRIVE CORAL SPRINGS, FL 33071-7003				Mailing Address SQUARE, INC. 1155 RIVERSIDE DRIVE CORAL SPRINGS, FL 33071-7003					
2. Principal Place of Business		3. Mailing Address		05042006 Chg-NP CR2E037 (4/06)		4. FEI Number 59-1994787		Applied For ☐ Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip		Country		Zip		Country			
6. Name and Address of Current Registered Agent SOUTHEAST CONDO MANAGEMENT 2855 NORTH UNIVERSITY DRIVE SUITE 310 CORAL SPRINGS, FL 33065						7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
Amended AR is \$61.25				9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS					11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD VALLE, AIDA ☐ Delete 1200 NW 87 AVE. #510 CORAL SPRINGS, FL				TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director ☒ Change ☐ Addition 000076718110 06/29/06--01047--006 **61.25			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD AUBRY, YVES ☒ Delete 1100 NW 87 AVE. #502 CORAL SPRINGS, FL				TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP, T Wise, Myrna ☐ Change ☒ Addition 1200 NW 87 Ave. #4412 Coral Springs, FL 33071			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD THEER, GLADYS ☒ Delete 1100 NW 87 AVE. #506 CORAL SPRINGS, FL				TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Falcoabramo, Anita ☐ Change ☒ Addition 1200 NW 87 Ave. #4416 Coral Springs, FL 33071			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAWS, RANDALL ☐ Delete P.O. BOX 770905 POMPANO BEACH, FL 33077				TITLE NAME STREET ADDRESS CITY - ST - ZIP	President ☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete				TITLE NAME STREET ADDRESS CITY - ST - ZIP	JC6/20 ☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					6/13/06 954-255-0012 Date Daytime Phone #				