


## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # 752237</b> 1. Entity Name <b>POINCIANA PLACE CONDOMINIUM ASSOCIATION VI, INC.</b>			
Principal Place of Business 3150 VIA POINCIANA LAKE WORTH, FL 33467		Mailing Address 3150 VIA POINCIANA LAKE WORTH, FL 33467	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suits, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>58-2168050</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>PMS CORP                  3150 VIA POINCIANA                  LAKE WORTH, FL 33467</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State: <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE	P	<input checked="" type="checkbox"/> Delete	
NAME	HOUCK, JENNIE		
STREET ADDRESS	3425 VIA POINCIANA DR #303		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
TITLE	S	<input checked="" type="checkbox"/> Delete	
NAME	MOORE, ANNETTE		
STREET ADDRESS	3425 VIA POINCIANA DR #204		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
TITLE	T	<input checked="" type="checkbox"/> Delete	
NAME	PAGNOTTA, AL		
STREET ADDRESS	3425 VIA POINCIANA DR #307		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
TITLE	VP	<input checked="" type="checkbox"/> Delete	
NAME	MIANO, JOSEPHINE		
STREET ADDRESS	3425 VIA POINCIANA DR SUITE 308		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
TITLE	D	<input checked="" type="checkbox"/> Delete	
NAME	SMOOKE, JEROME		
STREET ADDRESS	3425 VIA POINCIANA DR SUITE 102		
CITY-ST-ZIP	LAKE WORTH, FL 33467		
TITLE		<input checked="" type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	DP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMOOKE, JEROME		
STREET ADDRESS	3425 VIA POINCIANA # 102		
CITY-ST-ZIP	LAKE WORTH, FL. 33467		
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	VALDES, MIRIAM		
STREET ADDRESS	3425 VIA POINCIANA #101		
CITY-ST-ZIP	LAKE WORTH, FL. 33467		
TITLE	DS	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MATESKY, DIANE		
STREET ADDRESS	3425 VIA POINCIANA # 106		
CITY-ST-ZIP	LAKE WORTH, FL. 33467		
TITLE	DVE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOORE, ANNETTE		
STREET ADDRESS	3425 VIA POINCIANA # 204		
CITY-ST-ZIP	LAKE WORTH, FL. 33467		
500106257755 07/17/07--01018--002 **\$61.25			
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: <i>Jerome Smooke</i>		Date: 7-2-07 811 919 6319	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

FILED  
07 JUL -9 AM 7:04  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



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