

# 2006 NOT-FOR-PROFIT-CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 10, 2006 8:00 am**  
**Secretary of State**

05-10-2006 90090 041 \*\*\*\*61.25

**DOCUMENT # N02000001799**

1. Entity Name

LIBERTY BAY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

10191 WEST SAMPLE RD. #203  
C/O J&L PROPERTY MANAGEMENT, INC  
CORAL SPRINGS FL 33065

Mailing Address

10191 WEST SAMPLE RD. #203  
C/O J&L PROPERTY MANAGEMENT, INC  
CORAL SPRINGS FL 33065



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

54-2084714

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

CALDERAZZO, JAMES  
222 LAKEVIEW AVENUE  
SUITE 400  
WEST PALM BEACH FL 33401

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 resigning)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE D ☒ Delete  
NAME SCHACK, MICHAEL  
STREET ADDRESS 4788 WEST COMMERCIAL BOULEVARD  
CITY-ST-ZIP TAMARAC FL 33319

TITLE D ☒ Delete  
NAME DELFINO, ALEJANDRO  
STREET ADDRESS 4788 WEST COMMERCIAL BOULEVARD  
CITY-ST-ZIP TAMARAC FL 33319

TITLE D ☒ Delete  
NAME LOPEZ, CARLOS  
STREET ADDRESS 4788 WEST COMMERCIAL BOULEVARD  
CITY-ST-ZIP TAMARAC FL 33319

TITLE ☐ Delete  
NAME Corey Strolla  
STREET ADDRESS 3339 Blue fin dr  
CITY-ST-ZIP W Palm Beach FL 33411

TITLE ☐ Delete  
NAME Pam Tamburello  
STREET ADDRESS 3222 Ballard Rd  
CITY-ST-ZIP W. Palm Beach FL 33411

TITLE ☐ Delete  
NAME Rafael Salzano  
STREET ADDRESS 3351 Blue fin dr  
CITY-ST-ZIP W Palm Beach 33411

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME Verinica Beykas  
STREET ADDRESS 3307 Commodore Ct  
CITY-ST-ZIP W Palm beach FL 33319

TITLE ☐ Change ☐ Addition  
NAME Impribel Bilbao  
STREET ADDRESS 3417 Commodore Ct  
CITY-ST-ZIP W Palm Beach FL 33319

TITLE ☐ Change ☐ Addition  
NAME Michael Traver  
STREET ADDRESS 6688 Duval Ave  
CITY-ST-ZIP W Palm Beach FL 33319

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Corey Strolla President 4/22/06 561-802-8887