## Apr 27, 2005 8:00 am Secretary of State

04-27-2005 90280 035 \*\*\*\*61.25

ANNUAL REPORT	ION

SIGNATURE:

SIGNATURE AND

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # N02000008051 REGALO HOMEOWNERS ASSOCIATION, INC. adtegunb Principal Place of Business Malling Address 4400 WEST SAMPLES ROAD STE 200 COCONUT CREEK, FL 33073-3450 4400 WEST SAMPLES ROAD STE 200 COCONUT CREEK, FL 33073-3450 rincipal Place of Business 03242005 Chg-NP CR2E037 (10/03) 4. FEI Number 42-1587599 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent Name and Address of New Registered Agent MINTO COMMUNITIES, INC. 4400 WEST SAMPLE ROAD STE 200 COCONUT CREEK, FL 33073-3450 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 famil the obligations of registered a SIGNATURE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Ыу Мау 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES 10. DP Delete TITLE TITLE ☐ Change BEER, T.R. NAME NAME 4400 WEST SAMPLES ROAD STE 200 STREET ADDRESS STREET ADDRESS SUNIUSE, FL CITY-ST-ZIP COCONUT CREEK, FL 330733450 CITY-ST-ZIP DV-5D ROCHY KODE Change DΛ Delete TITLE TITLE CLEMENT, GARY NAME NAME 1145 SANGWAS MALP PILWY 4400 WEST SAMPLES ROAD STE 200 STREET ADDRESS STREET ADDRESS SUN RUSE CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK, FL 330733450 TD ARRON KODRIGUEZ Delete TITLE TITLE NAMÉ RODGERS, FRANK NAME 1145 SAWEYURSS COR 4400 WEST SAMPLES ROAD STE 200 STREET ADDRESS STREET ADORESS COCONUT CREEK, FL 330733450 CITY-ST-ZIP CITY-ST-7/P TITLE □ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7/P Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE □ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information 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 movement to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 is with all other like empowered. 12. Thereby certify that the information supplied with the indicated on this report or supplements of the corporation or the receiver of trust changed, or on an attachment with an ar