


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90299 016 ****70.00

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1. Entity Name
 WEST QUANTUM PLAZA OWNERS ASSOCIATION, INC.



Principal Place of Business
 1920 NW 32 STREET
 POMPANO BEACH, FL 33064

Mailing Address
 1920 NW 32 STREET
 POMPANO BEACH, FL 33064

60026211



2. Principal Place of Business
 2433 QUANTUM BLVD

3. Mailing Address
 2433 QUANTUM BLVD

Suite, Apt. #, etc.

03272006 Chg-NP CR2E037 (11/05)

City & State
 BOYNTON BEACH FL

City & State
 BOYNTON BEACH FL

Zip
 33426

Country
 USA

4. FEI Number
 20-0623533

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 BURROW, ROBERT H
 1920 NW 32 STREET
 POMPANO BEACH, FL 33064

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name ERIC MEYER
 Street Address (P.O. Box Number is Not Acceptable)
 2433 QUANTUM BLVD
 City BOYNTON BEACH FL Zip Code 33426

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 _____

Filing 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	PD	<input checked="" type="checkbox"/> Delete
NAME	BURROW, ROBERT H	
STREET ADDRESS	1920 NW 32 STREET	
CITY - ST - ZIP	POMPANO BEACH, FL 33064	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	BURROW, CAROLS	
STREET ADDRESS	1920 NW 32 STREET	
CITY - ST - ZIP	POMPANO BEACH, FL 33064	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BURROW, ANDREW S	
STREET ADDRESS	1920 NW 32 STREET	
CITY - ST - ZIP	POMPANO BEACH, FL 33064	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ERIC MEYER	
STREET ADDRESS	2433 QUANTUM BLVD	
CITY - ST - ZIP	BOYNTON BEACH FL 33426	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHAD FREDRICH	
STREET ADDRESS	2431 QUANTUM BLVD	
CITY - ST - ZIP	BOYNTON BEACH FL 33426	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHRISTIANE FRANCOIS	
STREET ADDRESS	2433 QUANTUM BLVD	
CITY - ST - ZIP	BOYNTON BEACH FL 33426	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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: Eric Meyer ERIC MEYER 3-27-06 561734-8202
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #