

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010253

FILED
Jul 21, 2005
Secretary of State

Entity Name: INDEPENDENCE TOWNHOMES I ASSOCIATION, INC.

Current Principal Place of Business:

3300 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

3300 UNIVERSITY DRIVE
SUITE 1
CORAL SPRINGS, FL 33065

Current Mailing Address:

3300 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Mailing Address:

3300 UNIVERSITY DRIVE
SUITE 1
CORAL SPRINGS, FL 33065

FEI Number: 20-2679514 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SIMON, ERIC A
6363 N.W. 6TH WAY
SUITE 250
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Change (X) Addition
Name: HILLIARD, ROBERT
Address: 3300 UNIVERSITY DRIVE SUITE 1
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DVP () Change (X) Addition
Name: BRUNO, ROBERT
Address: 3300 UNIVERSITY DRIVE SUITE 1
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DST () Change (X) Addition
Name: LEIKERT, PAUL
Address: 3300 UNIVERSITY DRIVE SUITE 1
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT HILLIARD

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07/21/2005

Electronic Signature of Signing Officer or Director

Date