2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N06000003438

1. Entity Name



FILED Apr 12, 2007 8:00 am Secretary of State

04-12-2007 90020 038 ****70.00

VERANO	PROPERTY OWNERS ASS	SOCIATION, INC.							
9700 RESERVE BLVD 9:		Mailing Address 9700 RESERVE BLVD PORT ST LUCIE, FL 349			300	V1 14V			
				j					
2. Principal Place of Business - No P.O. Box # 3.		3. Mailing Address				14U 15 UI 16 UI 16 UI	114 114 114 114 114 114 11		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04042007 Ch	ig-NP	CR2E037 (12/0	06)	
City & State		City & State			4. FEI Number 20 - 40	08278	, _	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Sta		\$8.75	Additional	
	6. Name and Address of Current F	Registered Agent			7. Name and Add	ress of New Re		·	
IEEEDEV B MARCOLIS DA			Name	Name					
JEFFREY R. MARGOLIS, P.A. C/O DUANE MORRIS LLP		100	Street Addres		(P.O. Box Number is Not Acceptable)				
200 SOUTH BISCAYNE BLVD., SUITE 3400 MIAMI, FL 33131				•					
			City				FL Zip	Code	
	e named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or	registere	ed agent, or both, in	the State of Flor	ida. I am familiar v	vith, and accept	
ine obligat	ilona or registered agent.							1	
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: I	Registered Agent signati	ure required	when reinstating)		DATE		
	Filing Fee is \$61.25	9. Election Camp			\$5.00 May Be		ike check payab		
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co			\$5.00 May Be Added to Fees		ike check payab da Department c		
10.	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co	ntribution.	A	\$5.00 May Be Added to Fees	Flori	da Department o	S IN 10	
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	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co	ntribution.	D/P	Added to Fees	Florices S TO OFFICER 2NA	da Department o	S IN 10	
TITLE NAME	OFFICERS AND DIR DP DAVIDSON, ROY	Trust Fund Co	ntribution. 11. TITLE NAME	D/P CLA	Added to Fees DDITIONS/CHANGE	Florices STO OFFICER 2NA BIVD	da Department o	S IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2007 OFFICERS AND DIR DP DAVIDSON, ROY 9700 RESERVE BLVD PORT ST LUCIE, FL 34986 DCP	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D/P CRA 9700 PORT	Added to Fees DDITIONS/CHANGE IGA-PER DRESERVE ST-LULIE IS	Florices 2NA BIVD FL 349	da Department o	of State S IN 10 Tage PAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2007 OFFICERS AND DIR DP DAVIDSON, ROY 9700 RESERVE BLVD PORT ST LUCIE, FL 34986 DCP FINGULIN, GEORGE	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P CRA 9700 PORT D/V	Added to Fees IGA. PER ORESERVE SF. LULLE ISONI CHOIL	Florices 2NA BIVD , FL 349	da Department de SAND DIRECTOR Char	of State S IN 10 Tage PAddition	
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12. I hereby certify that the information supplied with this fifing 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:

AARON CHORDST SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

772-467-1299