


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90385 010 ****61.25

DOCUMENT # N10538
 1. Entity Name
GLENEAGLES CONDOMINIUM I ASSOCIATION, INC.



Principal Place of Business
C/O LIPPMAN
6401 CONGRESS AVE STE 140
BOCA RATON, FL 33487

Mailing Address
C/O LIPPMAN
6401 CONGRESS AVE STE 140
BOCA RATON, FL 33487

40074967

BY: 3007



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

03042006 Chg-NP CR2E037 (11/05)

City & State
 Zip Country

4. FEI Number
59-2392776

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LIPPMAN, STEVE
6401 CONGRESS AVE
STE 140
BOCA RATON, FL 33487

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 _____ (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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	NORTH, RICHARD	7515 GLENDEVEN LANE #608	BOCA RATON, FL 33446	<input type="checkbox"/>
VP	DREW, DONALD	7677 GLENDEVEN LANE #1708	DELRAY BEACH, FL 33446	<input type="checkbox"/>
2VP	YOUNGS, JOSEPH	7527 GLENDEVEN LANE #801	DELRAY BEACH, FL 33446	<input checked="" type="checkbox"/>
T	YOUNG, JOSEPH	7527 GLENDEVEN LANE #801	BOCA RATON, FL 33446	<input checked="" type="checkbox"/>
S	LAZARUS, JEROME	7581 GLENDEVEN LANE #1404	DELRAY BEACH, FL 33446	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	NORTH, Richard	7515 Glendevon Lane #608	DELRAY Beach, FL 33446	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	Drew, Donald	7677 Glendevon Lane #1708	DELRAY Beach, FL 33446	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	EBEL, LORRAINE	7515 Glendevon Lane #605	DELRAY Beach, FL 33446	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
VP	NORM ARNOLD	7677 Glendevon Lane #1701	DELRAY Beach, FL 33446	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 empowerment.

SIGNATURE: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #