2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # N14933

1. Entity Name
GLENEAGLES CONDOMINIUM III ASSOCIATION, INC.

Principal Place of Business	Mailing Address
PO BOX 480337 DELRAY BEACH, FL 33448 US	C/O DAPA MAINTENANCE & MANAGEMENT INC PO BOX 480337 DELRAY BEACH, FL 33448

DO NOT WRITE IN THIS SPACE

01052006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2698874
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DAPA MAINT &MGMT, INC
204 BELLA VISTA WAY
WEST PALM BEACH, FL 33411

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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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GLASSMAN, MAX
STREET ADDRESS	15695 LORM MAREE LANE #502
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	VPT
NAME	MILTON SIROTA
STREET ADDRESS	15622 LOCH MAREE LN #6804
CITY-ST-ZIP	DELRAY BEACH, FL
TITLE	D
NAME	KAHANER, ELLIOT
STREET ADDRESS	15670 LOCH MAREE LANE #6202
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	PD
NAME	GITLIN, LAWRENCE
STREET ADDRESS	15863 LOCH MAREE LN #2101
CITY-ST-ZIP	DELRAY BEACH, FL
TITLE	D
NAME	GUMM, ANNETTE
STREET ADDRESS	15791 LOCH MAREE LANE #5203
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	VPD
NAME	BERTRAM DIAMOND
STREET ADDRESS	15790 LOCH MAREE LN #3605
CITY-ST-ZIP	DELARY BCH, FL

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01/23/06-80004-005 61.25

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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: Milton S. Sirota MILTON S. SIROTA 1/11/06 (561) 499-7272
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #