

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90038 037 ****70.00



DOCUMENT # N17794

1. Entity Name

PRINCETON ESTATES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

% LANG MGMT.CO.
21045 COMMERCIAL TRAIL
BOCA RATON FL 33486

Mailing Address

% LANG MGMT.CO.
21045 COMMERCIAL TRAIL
BOCA RATON FL 33486



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

65-0043685

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON FL 33486**

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

Signature (print or print name of registered agent and title if applicable)

(NOTE: Registered Agent signature required with reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

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
PD	LIPMAN, KENNETH ESO	3643 PRINCETON PLACE	BOCA RATON FL	<input type="checkbox"/>
D	GOODMAN, BARRY	5297 PRINCETON WAY	BOCA RATON FL 33496	<input type="checkbox"/>
D	MICHELIN, LOUISA	5258 PRINCETON WAY	BOCA RATON FL 33496	<input type="checkbox"/>
STD	SWARTZ, RICHARD	5270 PRINCETON WAY	BOCA RATON FL 33496	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VPD				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
STD	Richard Carroll	5281 Princeton Way	Boca Raton, FL 33496	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input 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 Section 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:

Kenneth V. Lipman, President

3/24/08