

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT



FILED

07 JUN 18 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06052007 Chg-NP CR2E037 (12/06)

DOCUMENT # N24061				1. Entity Name CORPORATE PARK AT EMERALD LAKE ASSOCIATION, INC.	
Principal Place of Business 3111 STIRLING RD FT. LAUDERDALE, FL 33312			Mailing Address 3111 STIRLING RD FT. LAUDERDALE, FL 33312		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0265915	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent POLIAKOFF, GARY A 3111 STIRLING ROAD FORT LAUDERDALE, FL 33312			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME	PTD POLIAKOFF, GARY A. 3111 STIRLING ROAD FT. LAUDERDALE, FL 33312	<input type="checkbox"/> Delete	TITLE NAME	700104923957 06/28/07--01037--016 **\$61.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	VD PAUL, STANFORD A. 3111 STIRLING ROAD FT. LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Delete	TITLE NAME	VD BECKER, ALAN S. 3111 STIRLING ROAD FT. LAUDERDALE, FL 33312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME	D HOLLANDER, WALTER 3109 STIRLING ROAD FT. LAUDERDALE, FL	<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	D BECKER, ALAN S. 3111 STIRLING RD. FT. LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Delete	TITLE NAME	D MANNE, ROBERT J. 3111 STIRLING ROAD FT. LAUDERDALE, FL 33312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME	D BERMAN, STEVEN 1930 HARRISON STREET STE 505 HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete	TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	D BATIEVSKY, ABRAHAM 2875 NE 191ST STREET # 601 AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete	TITLE NAME	D HOWE, JASON W. 521 NE 11 TH AVENUE FT. LAUDERDALE, FL 33301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: **GARY A. POLIAKOFF** 6/14/07 954-987-7550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #