## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## May 11, 2006 8:00 am Secretary of State DOCUMENT # N24699 1. Entity Name 05-11-2006 90243 042 \*\*\*\*61.25 PLANTATION PALMS ASSOCIATION, INC. Principal Place of Business Mailing Address J&L PROPERTY MGMT INC 203 10191 W SAMPLE RD J&L PROPERTY MGMT INC 203 10191 W SAMPLE RD CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 65-0093178 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JAMES CALDERAZZO Street Address (P.O. Box Number is Not Acceptable) 10191 W SAMPLE RD STE 203 CORAL SPRINGS FL 33065 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE ☐ Change ☐ Addition Greene Timothy 740 Plantation Fl WALKER, ARLINE NAME NAME 773 NW 100 TERR STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE moreau Carlos ☐ Change ☐ Addition KIRTMAN, JAY NAME NAME 780 101 St STREET ADDRESS 734 NW 101 TERR STREET ADDRESS Plantation fl 33324 FRANCE Steven PLANTATION FL 33324 CITY-ST-ZIP \_Delete Change Addition TESCHER, HOWARD NAME NAME 747 N.W. 101 ter again 755 NW 101 TERRACE STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 CITY-ST-7(P CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Plantation Addition TITLE ☐ Delete Change walsh Thomas NAME NAME STREET ADDRESS STREET ADDRESS 731 191 TER PIRHTATION FI CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE Perry Craice 135, 101 TER NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Plantation.

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 attachprept with an address, with all other like empowered.

SIGNATURE:

FILED