


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90017 030 ****61.25

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|---|---|
| DOCUMENT # N30183 1. Entity Name GLENEAGLES CONDOMINIUM VI ASSOCIATION, INC. |  |
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| Principal Place of Business P.O. BOX 480337 DELRAY BEACH, FL 33448 US | Mailing Address C/O DAPA MAINT & MGMT INC P.O. BOX 480337 DELRAY BEACH, FL 33448 US |
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DO NOT WRITE IN THIS SPACE



01102008 No Chg-NP CR2E037 (4/06)

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| 4. FEI Number 65-0093591 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent DAPA MAINT. & MGMT INC 204 BELLA VISTA WAY ROYAL 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

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| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD WINER, RALPH 7308 CLYNIE PLACE #14104 DELRAY BEACH, FL 33446 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P RIFKIN, BERNARD 7284 CLUNIE PLACE #14506 DELRAY BEACH, FL 33446 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD GROSSMAN, HOWARD 7344 CLUNIE PLACE #13606 DELRAY BEACH, FL 33446 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ROSENBLUM, EVERETT 7320 CLUNIE PL #13904 DELRAY BEACH, FL 33446 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GANELES, RONALD 7586 CLUNIE PLACE DELRAY BEACH, FL 33446 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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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 another like empowered.

SIGNATURE: Bernard Rifkin 1/28/08 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #