2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 22, 2008 8:00 am Secretary of State

DOCL	INAL	NIT #	NIZ	NNRA		



1. Entity Nam	ie	# N36844 PERTY OWNERS'	ASSOCIATION, IN	C.				01-22-2008	90058 04	4/ ****61.2	23
Principal Place of Business 955 S.E. FEDERAL HIGHWAY SUITE 202 STUART, FL 34994 US Mailing Address 955 S.E. FEDERAL HIGHWAY SUITE 202 STUART, FL 34994 US)70004)78 				
2. Principal P	lace of Busin	ness - No P.O. Box #	3. Mailing Address				11111111111111111	MINE BARE 1814 BARA BA	ili eheh eheh t		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01042008 Chg-NP CR2E037 (12/06)						
City & State		City & State				4. FEI Number 59-3006		· · · · · ·	—	oplied For	
Zip	Zip Country Zip		Zip	Country			5. Certificate of	of Status Desired		\$8.75 Add	litional
	6. Name	e and Address of Current I	Registered Agent				7. Name and	Address of New	Registered	d Agent	
ROSS FA	RIFARO	DNAN, P.A.			Name						
759 S. FEI STUART,	DERAL HI	IGHWAY			Street Address (P.O. Box Number is Not Acceptable)						
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					City				F	<u> </u>	
	e named entit tions of regis	ty submits this statement for stered agent.	the purpose of changing it	ts register	ed office o	r register	ed agent, or both	i, in the State of F	Torida. I an	n familiar with,	and accept
SIGNATURE											
	Signature, typed	d or printed name of registered agent a	nd title if applicable. (NO	TE: Beoistere	d Agent signat	tura recuired	rate retreate at a mile		DATE		
<u> </u>							when reinstating)		UATE	 _	
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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:

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

-H-08

772-286-0030

Daytime Phone #