2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State
04-23-2008 90046 049 ****61.25

DOCUMENT # N92000000040

1. Entity Name
MANGO VILLAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
ASSOCIATED PROPERT MGMT 1928 LAKE WORTH RD LAKE WORTH, FL 33461 US	ASSOCIATED PROPERT MGMT 1928 LAKE WORTH RD LAKE WORTH, FL 33461 US

02202008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0398827 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ASSOCIATED PROPERTY MNGMT
1928 LAKE WORTH RD
LAKE WORTH, FL 33461

7. Name and Address of New Registered Agent

Name EDWARD DICKER ESQUIRE
Street Address (P.O. Box Number is Not Acceptable) 1818 AUSTRALIAN AVE. South
Suite 400
City West Palm Beach FL Zip Code 33409

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BOOD, CAMILLE 322 W PINE ST 7 LAKE WORTH, FL 33462	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SPOONER, SCOTT 326 W. PINE ST. #17 LANTANA, FL 33462 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LEHTINEN, MEERI 326 W PINE ST., #16 LANTANA, FL 33462	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PESANT, CARL 230 SE 3rd AVE, BOYNTON BEACH, FL 33435 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAARIKOSKI, PETRI 326 W. PINE ST. #20 LANTANA, FL 33462	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHALEN, RICHARD 328 W. PINE ST. #23 LANTANA, FL 33462 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MINEO, LINDA 328 W. PINE ST. #25 LANTANA, FL 33462 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ 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: Scott W. Spooner 4-20-08 561-213-6792
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #