

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90028 041 ****61.25

DOCUMENT # N95000004616					
1. Entity Name CANDLEWOOD VILLAGE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 322 NE 3RD ST BOYNTON BEACH, FL 33435			Mailing Address 322 NE 3RD ST BOYNTON BEACH, FL 33435		
2. Principal Place of Business 314 NE 3rd Street		3. Mailing Address 314 NE 3rd Street			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Boynton Beach FL		City & State Boynton Beach FL		4. FEI Number 65-0663250	
Zip 33435		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent EDWARD DICKER ESQ DICKER, KRIVOK P.A. 1818 AUSTRALIAN AVE S STE 400 WEST PALM BEACH, FL 33409			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing ☐ \$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 TD NAME BERMAN, JEROME STREET ADDRESS 7587 ROCKPORT CIR CITY-ST-ZIP LAKE WORTH, FL 33467	☐ Delete		TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	☐ Change ☐ Addition	
TITLE PD NAME FEHRIBACH, MICHEAL STREET ADDRESS 7937 ROCKPORT CIRCLE CITY-ST-ZIP LAKE WORTH, FL 33467	☒ Delete		TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	☐ Change ☐ Addition	
TITLE PD NAME PERUSO, JOHN STREET ADDRESS 6914 DAWNTREE CT CITY-ST-ZIP LAKE WORTH, FL 33467	☐ Delete		TITLE PD NAME Peruso, John STREET ADDRESS 6914 Dawntree CT CITY-ST-ZIP Lake Worth FL 33467	☒ Change ☐ Addition	
TITLE SD NAME ROSEN, KAREN STREET ADDRESS 7858 ROCKPORT CIRCLE CITY-ST-ZIP LAKE WORTH, FL 33467	☐ Delete		TITLE SD NAME Rosen, Karen STREET ADDRESS 7858 Rockport Circle CITY-ST-ZIP Lake Worth, FL 33467	☒ Change ☐ Addition	
TITLE _____ NAME _____ STREET ADDRESS _____ CITY-ST-ZIP _____	☐ Delete		TITLE SD NAME Goria, Sheldon STREET ADDRESS 7714 Rockport Circle CITY-ST-ZIP Lake Worth, FL 33467	☐ 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 exemption stated in Section 119.07(3)(i), 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: <i>Jerome Berman</i> <i>John Peruso</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					