

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90037 006 ****61.25

DOCUMENT # N97000003954					
1. Entity Name MANCHESTER GREENS PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business GRS MGMT ASSOCIATES, INC 3900 WOOLLAKE BLVD STE 309 LAKE WORTH, FL 33463			Mailing Address GRS MGMT ASSOCIATES, INC 3900 WOOLLAKE BLVD STE 309 LAKE WORTH, FL 33463		
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 65-0853292	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FIELDS, GARY D 4400 PGA BLVD STE 900 PALM BEACH GARDENS, FL 33410			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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE SD	NAME ECKERT, ALAN		☐ Delete		
STREET ADDRESS 4064 MANCHESTER LAKE DR	☐ Change ☐ Addition				
CITY-ST-ZIP LAKE WORTH, FL 33467 33449					
TITLE PD	NAME KLEIT, STUART		☐ Delete		
STREET ADDRESS 4017 MANCHESTER LAKE DR.	☐ Change ☐ Addition				
CITY-ST-ZIP LAKE WORTH, FL 33467 33449					
TITLE VP	NAME ROSENBLUM, BERNARD		☐ Delete		
STREET ADDRESS 4124 MANCHESTER LAKE DR.	☐ Change ☐ Addition				
CITY-ST-ZIP LAKE WORTH, FL 33467 33449					
TITLE TP	NAME ABRAMOWITZ, RICHARD		☐ Delete		
STREET ADDRESS 4070 MANCHESTER LAKE DR.	☐ Change ☐ Addition				
CITY-ST-ZIP LAKE WORTH, FL 33467 33449					
TITLE 	NAME 		☐ Delete		
STREET ADDRESS 	☐ Change ☐ Addition				
CITY-ST-ZIP 					
TITLE 	NAME 		☐ Delete		
STREET ADDRESS 	☐ Change ☐ Addition				
CITY-ST-ZIP 					
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 empowerments.					
SIGNATURE: <i>Bernard Rosenblum</i> VP <i>4/4/08</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					