

41249

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90056 027 \*\*\*\*61.25

<b>DOCUMENT # N98000000532</b>					
1. Entity Name <b>MIZNER'S PRESERVE HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>6300 PARK OF COMMERCE BOCA RATON, FL 33487</b>			Mailing Address <b>6300 PARK OF COMMERCE BOCA RATON, FL 33487</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01302008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number <b>65-1046463</b>	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>CAPLAN, LOUIS C/O SOCHS, SAX, KLEIN 301 YUMATO ROAD, SUITE 4150 BOCA RATON, FL 33401</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
				<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STOPEK, RICK		NAME	<i>D Theodore Laro</i>	
STREET ADDRESS	6311 VIA VENETIA N.		STREET ADDRESS	<i>16324 VIA VENETIA N</i>	
CITY-ST-ZIP	DELRAY BEACH, FL 33484		CITY-ST-ZIP	<i>DELRAY BEACH, FL 33484</i>	
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUNG, JAMES		NAME		
STREET ADDRESS	16420 VIA VENETIA NORTH		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ARON, STEPHEN		NAME		
STREET ADDRESS	6363 DORSAY CRT		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GOULD, ALAN		NAME		
STREET ADDRESS	6401 VIA VENETIA NORTH		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SALAMON, IRA		NAME		
STREET ADDRESS	6364 DORSEY COURT		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		CITY-ST-ZIP		
TITLE	<i>D</i>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<i>Howard Gains</i>		NAME		
STREET ADDRESS	<i>6070 VIA VENETIA SOUTH</i>		STREET ADDRESS		
CITY-ST-ZIP	<i>DELRAY BEACH, FL 33484</i>		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 empowered.					
SIGNATURE: _____			Date: <i>3/12/08</i>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		