

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

03-12-2007 90366 028 \*\*\*\*61.25

**DOCUMENT # N99000007396**

1. Entity Name  
**PALERMO AT VENETIAN ISLES (PARCEL D)  
 HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
**15200 JOG RD  
 205  
 DELRAY BEACH, FL 33446**

Mailing Address  
**15200 JOG RD  
 205  
 DELRAY BEACH, FL 33446**

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 City & State

Zip Country Zip Country

**40034097**



01042007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**65-0984573**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**SACH'S SAX & KLEIN, P.A.  
 301 YAMATO ROAD, STE 4150  
 BOCA RATON, FL 33431**

**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 \_\_\_\_\_ 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, 2007**

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**

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TD<br>HERMAN, AARON<br>8970 VIZ TUSCANY DR.<br>BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>HART, STEVEN<br>8942 VIA TUSCANY DR<br>BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete                |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SD<br>KESSLER, SHELDON<br>8812 VIA TUSCANY DR<br>BOYNTON BEACH, FL 33437 <input type="checkbox"/> Delete           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>SCARNA, PAUL<br>8954 VIA TUSCANY DR.<br>BOYNTON BEACH, FL 33437 <input checked="" type="checkbox"/> Delete   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VD<br>TANCREDI, JOSEPH<br>8837 TUSCANY DRIVE<br>BOYNTON BEACH, FL 33437 <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete  |

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

|  |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><i>See attached</i> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br><i>See attached</i> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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: *Joseph Tancredi*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President 561-731-5406  
 Date: 2/26/07 Daytime Phone #

40034097

**ATTACHMENT TO 2007 NOT-FOR-PROFIT ANNUAL REPORT**

Document # N99000007396

Association: ~~Palermo~~ at Venetian Isles (Parcel D) Homeowners  
Association, Inc.

**CHANGE - PD**

Tancredi, Joseph  
8837 Via Tuscany  
Boynton Beach, FL 33437

**CHANGE - VPD**

Scarna, Paul  
8954 Via Tuscany Drive  
Boynton Beach, FL 33437