

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 27, 2004 8:00 am**  
**Secretary of State**

04-27-2004 90073 038 \*\*\*150.00

**DOCUMENT # P02000130942**

1. Entity Name  
 19TH AVENUE TOWNHOUSE PARTNERS, INC.



Principal Place of Business  
 16415 MIZNER CLUB DRIVE  
 DELRAY BEACH, FL 33446

Mailing Address  
 16415 MIZNER CLUB DRIVE  
 DELRAY BEACH, FL 33446

**94068063**



2. Principal Place of Business  
 Suite, Apt. #, etc. **1181 S. ROGERS CIRCLE SUITE 31**  
 City & State **BOCA RATON, FL 33487**

3. Mailing Address  
 Suite, Apt. #, etc. **1181 S. ROGERS CIRCLE SUITE 31**  
 City & State **BOCA RATON, FL 33487**

01192004 Chg-P CR2E034 (10/03)

Zip Country Zip Country

4. FEI Number **14-1863121** Applied For Not Applicable

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

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

PFENDLER, RICHARD  
 16415 MIZNER CLUB DRIVE  
 DELRAY BEACH, FL 33446

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box, etc.) **1181 S. ROGERS CIRCLE SUITE 31**  
 City **BOCA RATON, FL 33487** 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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PFENDLER, RICHARD 16415 MIZNER CLUB DRIVE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>1181 S. ROGERS CIRCLE SUITE 31 BOCA RATON, FL 33487</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS 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 exemption stated in Section 119.07(3)(f), 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 607, 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:** *Richard P. Pfendler* **4-15-04** **561 988 1267**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #