2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90307 025 ****61.25

DOCUMENT # N48018

1. Entity Name
MONTEGO BAY TOWNHOUSE HOMEOWNER'S ASSOCIATION, INC.

000043726

Principal Place of Business	Mailing Address
2910 PORT ROYALE LN FT LAUDERDALE, FL 33308	2910 PORT ROYALE LN FT LAUDERDALE, FL 33308

02232005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0380937 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BERZNER, STEVEN L ESQ
1040 BAYVIEW DRIVE SUITE 605
FORT LAUDERDALE, FL 33304

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 _____
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, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TAPP, THOMAS L 2912 PORT ROYAL LANE FORT LAUDERDALE, FL 33308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BRISTOL, RICHARD 2922 PORT ROYALE LANE FORT LAUDERDALE, FL 33308	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Milo, Sandra 2919 Port Royale La Ft. Lauderdale, Fl 33308	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD AVERBACH, MURIEL 2914 PORT ROYALE LANE FORT LAUDERDALE, FL 33308	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Hunt, Cheryl 2917 Port Royale La Ft. Lauderdale Fl 33308	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S NIKIFOROS, KIRSTA 2916 PORT ROYALE LANE FORT LAUDERDALE, FL 33308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCOTT, JUDITH 2932 PORT ROYALE LN FT. LAUDERDALE, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BYAL, JANE 2913 PORT ROYALE LANE FORT LAUDERDALE, FL 33308	☐ 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: _____ Vice President (SANDRA A Milo 4/24/05 954.566-0877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #