

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90252 026 ****61.25

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1. Entity Name

LINTON RIDGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

LINTON RIDGE CONDO.
2275 LINTON RIDGE CIRCLE
DELRAY BEACH FL 33444
US

Mailing Address

C/O M.J. GALLUP, ACCT.
~~235 NE 6TH AVENUE, STE D~~
DELRAY BEACH FL 33483
US



2. Principal Place of Business

GALLUP ACCOUNTING
817 George Bush Blvd.
Delray Beach, FL 33483

3. Mailing Address

GALLUP ACCOUNTING
Suite, Apt. #, etc.
817 George Bush Blvd.
Delray Beach, FL 33483

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2365906

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GALLUP ACCOUNTING
PUGH, DAVID
~~235 NE 6TH AVENUE, STE D~~
817 George Bush Blvd.
Delray Beach, FL 33483

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 V ☐ Delete
NAME MUZICH, ROSE
STREET ADDRESS 5070 LAKE BLVD.
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE P ☐ Delete
NAME MCCABE, EDWARD
STREET ADDRESS 2355 LINTON RIDGE CIRCLE
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE ~~ST~~ ☐ Delete
NAME PENKALSKI, JOSEPH
STREET ADDRESS 2754 DUNLIN ROAD
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE D ☒ Delete
NAME CIUS, MAFIDELENE
STREET ADDRESS 2275 LINTON RIDGE CIR., UNIT E-3
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE ~~ST~~ ☐ Delete
NAME *Lee, Cathy*
STREET ADDRESS *2255 Linton Ridge Circle*
CITY-ST-ZIP *Delray Beach, FL 33444*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Rose Muzich Vice Pres.

Date

Daytime Phone #