

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2008 8:00 am**  
**Secretary of State**

05-05-2008 90229 014 \*\*\*\*61.25

<b>DOCUMENT # N22627</b> 1. Entity Name <b>THE ALHAMBRA NORTH CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O WALTER UNGERMANN P.O. BOX 395 JUPITER, FL 33468</b>			Mailing Address <b>C/O WALTER UNGERMANN P.O. BOX 395 JUPITER, FL 33468</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-2455340</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GUINN, CLAUDETTE 725 N A1A STE. #E-108 JUPITER, FL 33477</b>			7. Name and Address of New Registered Agent Name <b>Walter Ungermann</b> Street Address (P.O. Box Number is Not Acceptable) <b>725 NA1A Ste C-117</b> City <b>Jupiter</b> State <b>FL</b> Zip Code <b>33477</b>		
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 <u><i>Walter Ungermann</i></u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
<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 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD UNGERMANN, WALTER 725 A A1A STE C-117 JUPITER, FL 33468</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST ZUDANS, ERIK 725 N A1A STE D-107 JUPITER, FL 33477</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D RAYMOND, ERIK 725 N A1A STE D-107 JUPITER, FL 33477</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Zudans, Erik 725 NA1A Ste D-107 Jupiter, FL 33477</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<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: <u><i>Walter Ungermann</i></u>		Date: <b>4/30/08</b>		Daytime Phone #: <b>561 575 5868</b>	