

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

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 709946

1. Entity Name

POINCIANA 4630, INC.



Principal Place of Business

4630 POINCIANA STREET
LAUDERDALE BY THE SEA FL 33308-3527
US

Mailing Address

4630 POINCIANA STREET
LAUDERDALE BY THE SEA FL 33308-3527
US

2. Principal Place of Business

Suite, Apt #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6201932

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROGLIANO, RONALD
4630 POINCIANA ST
LAUDERDALE BY SEA FL 33308

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 resigning)

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 PD ☐ Delete
NAME ROGLIANO, MARY E.
STREET ADDRESS 4630 POINCIANA ST
CITY-STATE-ZIP LAUDERDALE BY SEA FL

TITLE MD ☐ Delete
NAME BUTLER, AUGUST P.
STREET ADDRESS 4630 POINCIANA ST
CITY-STATE-ZIP LAUDERDALE BY SEA FL

TITLE SD ☐ Delete
NAME CUNNINGHAM, ANNA V.
STREET ADDRESS 4630 POINCIANA ST
CITY-STATE-ZIP LAUDERDALE BY SEA FL

TITLE VD ☐ Delete
NAME BRADY, JAMES J JR
STREET ADDRESS 4630 POINCIANA ST
CITY-STATE-ZIP LAUDERDALE BY SEA FL

TITLE TD ☐ Delete
NAME ROGLIANO, RONALD
STREET ADDRESS 4630 POINCIANA ST
CITY-STATE-ZIP LAUDERDALE BY SEA FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-STATE-ZIP
UN0000455051
03/15/06-20040-017 61.25

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-STATE-ZIP

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TITLE ☐ Change ☐ Add
NAME
STREET ADDRESS
CITY-STATE-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.