

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

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90304 009 ****61.25

DOCUMENT # 716531

1. Entity Name

THREE THOUSAND SOUTH ASSOCIATION, INC.



Principal Place of Business

3000 S. OCEAN BLVD
BOCA RATON FL 33432
US

Mailing Address

3000 S. OCEAN BLVD
BOCA RATON FL 33432
US



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

59-1308868

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, GILLESPIE & ALLISON, P.A.
1515 SOUTH FEDERAL HIGHWAY SUITE #300
BOCA RATON FL 33432

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 re-registering)

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	P	<input type="checkbox"/> Delete
NAME	DELANEY, JOSEPHINE	
STREET ADDRESS	3000 S OCEAN BLVD #702	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	RUBENSTEIN, MYRA	
STREET ADDRESS	3000 S OCEAN BLVD, #102	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	T	<input type="checkbox"/> Delete
NAME	NYE, ROGER	
STREET ADDRESS	3000 S OCEAN BLVD, #1503	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	VP	<input type="checkbox"/> Delete
NAME	RUSSELLE, HARRY	
STREET ADDRESS	3000 S OCEAN BLVD #705	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HANFLING, GENE	
STREET ADDRESS	3000 S OCEAN BLVD, #1402	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELANEY, JOSEPHINE	
STREET ADDRESS	3000 S. OCEAN BLVD #702	
CITY-ST-ZIP	BOCA RATON FL.	
TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCAFFERTY, PHILLIP	
STREET ADDRESS	3000 S. OCEAN BLVD	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRODKIN, RONALD	
STREET ADDRESS	3000 S. OCEAN BLVD	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/06

Date

Daytime Phone #