

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 22, 2006 8:00 am
Secretary of State**

04-18-2006 90069 044 ****61.25

DOCUMENT # 721336

1. Entity Name
THE COLONIES, INC.



Principal Place of Business
**11404 W SAMPLE RD
CORAL SPRINGS, FL 33065**

Mailing Address
**11404 W SAMPLE RD
CORAL SPRINGS, FL 33065 US**



01092006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1584350

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SUNDANCE PROPERTY MANAGEMENT
11404 W SAMPLE ROAD
CORAL SPRINGS, FL 33065**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$81.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TERRELL, DOROTHY
STREET ADDRESS	2603 NW 47 TERRACE
CITY- ST- ZIP	FORT LAUDERDALE, FL 33313
TITLE	VP
NAME	THOMAS, VERONA
STREET ADDRESS	2751 NW 47TH TERRACE
CITY- ST- ZIP	LAUDERDALE LAKES, FL 33313
TITLE	DS
NAME	JEWETTE, WYNN
STREET ADDRESS	2605 NW 47TH TERR
CITY- ST- ZIP	LAUDERDALE LAKES, FL 33313
TITLE	T
NAME	BEWLEY, KENOSHA
STREET ADDRESS	2764 NW 47TH TER
CITY- ST- ZIP	LAUDERDALE LAKES, FL 33313
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE**

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: *Dorothy H. Terrell - President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-18-6

Date

Daytime Phone #