

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

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90076 022 ****70.00

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1. Entity Name

MARANATHA APARTMENTS, INC.



Principal Place of Business

11 S.W. 4TH AVENUE
BOCA RATON FL 33432

Mailing Address

11 S.W. 4TH AVENUE
BOCA RATON FL 33432



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

23-7415032

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAVELKA, CHARLES
11 SW 4 AVE, 31C
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name **AS ABOVE**

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

Charles Havelka

Signature, typed, printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

2-5-06

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 NAME P
FROST, DAN ☐ Delete
STREET ADDRESS 11 SW 4TH AVENUE, APT A1
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME VD
JEFFERIES, WILLIAM ☐ Delete
STREET ADDRESS 11 SW 4TH AVENUE, APT 28C
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME TD
HAVELKA, CHARLES ☐ Delete
STREET ADDRESS 11 SW 4TH AVENUE, APT 31-C
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME BD
WALSH, MICHAEL ☐ Delete
STREET ADDRESS 11 SW 4TH AVENUE, APT 11A
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME SD
BUTLER, ELEANOR ☐ Delete
STREET ADDRESS 11 SW 4TH AVENUE, APT 17B
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE NAME **HESTER PATTERSON** ☐ Change ☐ Addition
STREET ADDRESS **11 S.W. 4TH AVE 22B**
CITY-ST-ZIP **BOCA RATON, FL 33432**

TITLE NAME ☐ Change ☐ Addition
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

Charles Havelka **2-5-06**