2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #724669

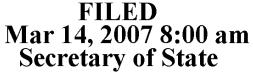
Principal Place of Business

1. Entity Name
THE TOWNHOUSES OF EMERALD HILLS, INC.



Mailing Address

THE CONTINENTAL GROUP LTD



03-14-2007 90041 035 ****61.25

20006240

1201 ST. AN HOLLYWOOD			THE CONTINENTAL GROUP LTD 2950 N 28TH TERRACE HOLLYWOOD, FL 33020					\$18\8 8\\\\\			3 81 83	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01182007 C	Chg-NP	CR2E03	7 (12/06)		
City & State			City & State				4. FEI Number 59-149384	40		_ 	plied For t Applicable	
Zip .	Country		Zip		Country		5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current	Registere	d Agent			7. Name and Ad	dress of New I	Registered A	gent		
HYMAN, KAPLAN, GANGUZZA, SPECTOR MUSEUM TOWER STE 2701 150 W. FLAGLER STREET MIAMI, FL 33130			∪D * W\	+ MARS		Name						
						Street Address (P.O. Box Number is Not Acceptable)						
					City			·	FL	Zip Code	э .	
		submits this statement for	or the purpo	ose of changing its re	egistered office or	registere	ed agent, or both, in	n the State of Fl		amiliar with,	and accept	
the obligat	ions of registe	ered agent.										
	•	-										
SIGNATURE .	Signature, typed	or printed name of registered agen	t and title d app	icable. (NOTE: I	Registered Agent signatu	re required	when reinstating)		DATE			
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Fin Trust Fund Contributio			\$5.00 May Be Added to Fees Make check payable to Florida Department of State			,		
10. OFFICERS AND DIF												
10.		OFFICERS AND D	RECTORS		11.	Δ	DDITIONS/CHANG	J GES TO OFFICE	RS AND DIR	ECTORS IN	10	
10.	Р	# · · ·	RECTORS	☐ Delete	11. TITLE	Δ	ODITIONS/CHANG	SES TO OFFICE	ERS AND DIR	ECTORS IN	10 Addition	
TITLE NAME	WIENER, I	BERNIE	RECTORS	☐ Delete	TITLE NAME	Δ	DDITIONS/CHANG	J SES TO OFFICE	ERS AND DIR			
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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 withyan address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9549628IV