

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 22 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # 726853 (5)
1. Corporation Name
POINCIANA WEST, INC.



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| Principal Place of Business 1230 OLD BOYNTON RD. BOYNTON BCH FL 33426 | Mailing Address 1230 OLD BOYNTON RD. BOYNTON BCH. FL 33426 |
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|--|---|--|
| 3. Date Incorporated or Qualified 07/03/1973 | | |
| 4. FEI Number 59-2163574 | Applied For <input type="checkbox"/> | Not Applicable <input type="checkbox"/> |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required | |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees | |
| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country |
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9. Name and Address of Current Registered Agent

**MONTGOMERY, SCOTT
6428 LANSDOWNE CIRCLE
BOYNTON BEACH FL 33437**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1998 | |
|----------------------------|----------------------------------|---|-----------------------------------|
| TITLE | D | 1.1 TITLE | SD |
| NAME | FAUST, LLOYD | 1.2 NAME | HOESTEN, RAYMOND |
| STREET ADDRESS | 1230 OLD BOYNTON RD. | 1.3 STREET ADDRESS | 1250 Old Boynton Rd. # 317 |
| CITY - ST - ZIP | BOYNTON BCH. FL 33426 | 1.4 CITY - ST - ZIP | Boynton Beach, FL 33426 |
| TITLE | PD | 2.1 TITLE | D |
| NAME | MONTGOMERY, SCOTT | 2.2 NAME | WALTERS, ROSE |
| STREET ADDRESS | 6428 LANSDOWNE CIRCLE | 2.3 STREET ADDRESS | 1230 Old Boynton Rd #218 |
| CITY - ST - ZIP | BOYNTON BCH FL | 2.4 CITY - ST - ZIP | Boynton Beach, FL 33426 |
| TITLE | SD | 3.1 TITLE | |
| NAME | KENNER, A. HOPKIN | 3.2 NAME | |
| STREET ADDRESS | 21 SWALLOW DRIVE | 3.3 STREET ADDRESS | |
| CITY - ST - ZIP | BOYNTON BCH FL | 3.4 CITY - ST - ZIP | |
| TITLE | VP | 4.1 TITLE | |
| NAME | EARNHART, CRAIG | 4.2 NAME | |
| STREET ADDRESS | 811 GEORGE BUSH BLVD. | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | DELRAY BEACH FL | 4.4 CITY - ST - ZIP | |
| TITLE | D | 5.1 TITLE | |
| NAME | GORS, STEVE | 5.2 NAME | |
| STREET ADDRESS | 1250 OLD BOYNTON RD, #320 | 5.3 STREET ADDRESS | |
| CITY - ST - ZIP | BOYNTON BEACH FL | 5.4 CITY - ST - ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | |

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| Change <input type="checkbox"/> | Addition <input checked="" type="checkbox"/> |
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment to an address.

SIGNATURE: **CRAIG D. EARNHART** 3/1/98 561-265-3666

CR2E037 (10/97)