

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726853

FILED
Feb 08, 2005
Secretary of State

Entity Name: POINCIANA WEST, INC.

Current Principal Place of Business:

904 SE 5TH AVE.
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

904 SE 5TH AVE.
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 59-2163574 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAGHER, JOSEPH M
904 SE 5TH AVE.
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: MONTGOMERY, SCOTT
Address: 6428 LANGDOWNE CIRCLE
City-St-Zip: BOYNTON BCH., FL 33437

Title: D () Delete
Name: WALTERS, ROSE
Address: 1230 OLD BOYNTON RD. #218
City-St-Zip: BOYNTON BCH., FL 33426

Title: STD () Delete
Name: HOPKINS, KENNEMAS
Address: 21 SWALLOW DR
City-St-Zip: BOYNTON BCH, FL 33437

Title: DP () Delete
Name: EARNHART, CRAIG
Address: 70 SE 4TH AVE.
City-St-Zip: DELRAY BCH, FL 33483

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: MONTGOMERY, SCOTT
Address: 6428 LANGDOWNE CIRCLE
City-St-Zip: BOYNTON BCH., FL 33437

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HOPKINS, KENNEMAS
Address: 21 SWALLOW DR
City-St-Zip: BOYNTON BCH, FL 33437

Title: PD (X) Change () Addition
Name: EARNHART, CRAIG
Address: 70 SE 4TH AVE.
City-St-Zip: DELRAY BCH, FL 33483

Title: TD () Change (X) Addition
Name: DAGHER, JOSEPH M
Address: 904 SE 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH M. DAGHER

TD

02/08/2005

Electronic Signature of Signing Officer or Director

Date