2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2008 8:00 am Secretary of State

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DOCUMENT # 727119 1. Entity Name MANORS TOWNHOUSE CONDOMININC.			NIUM ASSOCIATIO	on,	4		0055 003 ****61	
	Principal Place 4162 INVERR LAUDERHILL,	ARY DRIVE	Mailing Address 4162 INVERRARY DRI LAUDERHILL, FL 333		,	·*.		
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2. Principal Place of Business - No P.O. Box # 4800 Nor-th State Rd 7			3. Mailing Address 4800 Noith State Rd.7				LIBIN BIBU BIBU 8180 3180 BIBU	
ļ	Suite, Apt.		Suite, Apt. #, etc.	नराष्ट्र ग्रंब,	03212008	05. 110	ODDECOT (40100)	
	105		105			Chg-NP	CR2E037 (12/06)	
	City & State	lale Lakes, FL	Lauderdale	Lakes, F	4. FEI Number 23-7441	076		plied For t Applicable
l	^{Zip} 333	Country USA	33319	Country U.S.A.	5. Certificate of	of Status Desired	\$8.75 Add Fee Required	itional
ŀ		6. Name and Address of Current	Registered Agent	Nama		Address of New Re		
POINTE MANAGEMENT GROUP					Name BAUMAN, BAUMAN + KANNEr			
ERIC ESTEBANEZ 15016 6TH AVE STE 206					Street Address (P.O. Box Number is Not Acceptable) Blvd.			
I	DELKAY B	EACH, FL 33483		City 0			Zip Code	
The above named entity submits this statement for the purpose of changing its registered.					Plantation FL 333/			
I		named entity submits this statement to ons of registered agent.	r the purpose of changing if	s registered office of	registered agent, or both	i, in the State of Flor	rida. I am familiar with,	and accept
SIGNATURE D'Avid Bauman 3/2,108								>
	SIGNATURE _	Signature, typed or printed name of registered agent		TE: Registered Agent signal	ure required when reinstating)		DATE	
		Filing Fee is \$61.25	B. Flantian Co	ampaign Financing		147		
1		Due by May 1, 2008		Contribution.	\$5.00 May Be Added to Fees	Flori	ike check payable to da Department of Si	
	10	OFFICERS AND DIF	Trust Fund		Added to Fees	Flori		ate
	TITLE	OFFICERS AND DIF	Trust Fund	Contribution. 11. 11LE	Added to Fees	Flori	da Department of St	ate
		OFFICERS AND DIF	Trust Fund	Contribution.	Added to Fees	Flori	da Department of St	10
	TITLE NAME	OFFICERS AND DIF	Trust Fund	Contribution. 11. TITLE NAME	Added to Fees	Flori	da Department of St	10
	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIF P MURPHY, HORACE 3954 INVERRARY DR LAUDERHILL, FL 33319	Trust Fund	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Flori	da Department of St	10
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	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIF P MURPHY, HORACE 3954 INVERRARY DR LAUDERHILL, FL 33319 T EHRLICH, MATHEW	Trust Fund	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Flori	da Department of SI	ate 10 Addition
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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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-08.731-089