

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

04-27-2006 90417 001 15,496.25

DOCUMENT # 728077 1. Entity Name DURHAM "V" CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business CONDO OWNERS ORG OF CNTRY VILL E 3501 WEST DRIVE DEERFIELD BCH., FL 33442-2085			Mailing Address CONDO OWNERS ORG OF CNTRY VILL E 3501 WEST DRIVE DEERFIELD BCH., FL 33442-2085		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-1906044				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CONDO OWNER ORG OF CNTRY VILL E 3501 WEST DRIVE DEERFIELD BEACH, FL 33442-2085			Name 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	VP	☐ Change ☒ Addition
NAME	BOURGEOIS, JOHN		NAME	John Baril	
STREET ADDRESS	618 DURHAM V		STREET ADDRESS	617 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H 33442	
TITLE	PD	☒ Delete	TITLE	T	☐ Change ☒ Addition
NAME	ROSEN, MANNY		NAME	ISABELLE Leibovitch	
STREET ADDRESS	620 DURHAM V		STREET ADDRESS	604 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H 33442	
TITLE	T	☒ Delete	TITLE	S	☐ Change ☒ Addition
NAME	BARIL, JEAN		NAME	VIRGINIA NOGAN	
STREET ADDRESS	609 DURHAM V		STREET ADDRESS	609 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H 33442	
TITLE	S	☒ Delete	TITLE	D	☐ Change ☒ Addition
NAME	AMOURINI, MARY		NAME	MANNY ROSEN	
STREET ADDRESS	600 DURHAM V		STREET ADDRESS	620 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H 33442	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	DUNKELMAN, ALBERT		NAME	Pat AMORINI	
STREET ADDRESS	606 DURHAM V		STREET ADDRESS	600 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H 33442	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	STEIN, DAVID		NAME	TOMAS JARNICK	
STREET ADDRESS	611 DURHAM V		STREET ADDRESS	605 Durham V	
CITY-ST-ZIP	DEERFIELD BCH., FL 33442		CITY-ST-ZIP	D.B. H. 33442	
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.					
SIGNATURE: <u>John P. Bourgeois</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <u>4/1/06</u> (954) 427-4833 Daytime Phone #		

John P. BOURGEOIS