


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90016 004 ****61.25

DOCUMENT # 728340 1. Entity Name TOWNHOUSE EAST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 450 SE 7 ST. DANIA BEACH, FL 33004 US			Mailing Address 450 SE 7 ST. DANIA BEACH, FL 33004 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
JACKSON, KEVIN ONE FINANCIAL PLAZA #2111 FORT LAUDERDALE, FL 33394				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	V	<input checked="" type="checkbox"/> Delete	TITLE	✓	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FABRICANT, HYMAN		NAME	Boutros, Nabil	
STREET ADDRESS	450 SE 7TH ST., #268		STREET ADDRESS	450 SE 7TH ST #211	
CITY - ST - ZIP	DANIA, FL 33004		CITY - ST - ZIP	Dania Bch, FL 33004	
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GADOL, PAULA		NAME		
STREET ADDRESS	450 SE 7TH STREET #260		STREET ADDRESS		
CITY - ST - ZIP	DANIA BEACH, FL 33004		CITY - ST - ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RUSSELL, DOROTHY		NAME	VINO, Susan	
STREET ADDRESS	450 SE 7TH ST, #270		STREET ADDRESS	450 SE 7TH ST #218	
CITY - ST - ZIP	DANIA, FL 33004		CITY - ST - ZIP	Dania Bch, FL 33004	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ITALICO, NICHOLAS		NAME	Cera, Mimi	
STREET ADDRESS	450 SE 7TH ST, #279		STREET ADDRESS	450 SE 7TH ST #	
CITY - ST - ZIP	DANIA, FL 33004		CITY - ST - ZIP	Dania Bch, FL 33004	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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>Susan VINO</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> <u>1/27/06</u> <small>Date</small> <u>954-922-9352</u> <small>Daytime Phone #</small> </div>		

400213



01192006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1669715

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**