2007 NOT-FOR-PROFIT CORPORATION

Mar 12, 2007 8:00 am ANNUAL REPORT **Secretary of State DOCUMENT #728621** 03-12-2007 90095 009 ****61.25 CLASSIC TOWNE HOUSES CONDOMINIUM WEST, INC. Principal Place of Business Mailing Address 40033568 11784 WEST SAMPLE RD 11784 WEST SAMPLE RD **SUITE 103 SUITE 103** CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 33065 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02142007 Cha-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 59-1577710 Not Applicable Country Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name UNITED COMMUNITY MGT CORP Street Address (P.O. Box Number is Not Acceptable) 11784 WEST SAMPLE RD CORAL SPRINGS, FL. 33065 City 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. DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. VD ☐ Change ■ Addition ☐ Delete TITLE TITLE HERZEK, STANLEY NAME NAME 4880 SHERIDAN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP TITLE 🗹 Delete TITLE SALDARINI, KIMBERLY L NAME 4888 SHERIDIAN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY - ST - ZIP ☐ Delete TITLE TITLE CHARITON, ELLEN NAME 4936 SHERIDAN ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE TD EINHORN, BARRY NAME 4912 SHERIDAN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33021 ☐ Delete TITLE ☐ Change Addition TITLE VALENTINE, DONNA NAME STREET ADDRESS STREET ADDRESS 4944 SHERIDAN ST HOLLYWOOD, FL 33021 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE ARONOWITZ, BRUCE

FILED

12. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS CITY-ST-ZIP

5000 SHERIDAN ST

HOLLYWOOD, FL 33021

Bruce SIGNATURE: SIGNATURE AND TIPED OR PHINT D NAME OF SIGNING OFFICER OR DIRECTOR