2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State
03-09-2006 90162 026 ****61.25

DOCUMENT # 729879

1. Entity Name
EARMAN VILLAS ASSOCIATION, INC.

400271551

Principal Place of Business	Mailing Address
809 HUMMINGBORD WAY #1C. NORTH PALM BEACH, FL 33408	185 E INDIANTOWN RD #127 JUPITER, FL 33477

01172006 Chg-NP CR2E037 (11/05)

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 59-1650090 ☐ 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
PAPAGEORGE, TERRI C/O ACCOUNTING DEPT., INC. 185 EAST INDIANTOWN RD., STE. 127 JUPITER, FL 33477	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) DATE

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D SORGE, DONALD 510 PROSPERITY FINS RD #1B NORTH PALM BEACH, FL 33408	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jay Polito 813 Hummingbird Way #1A North Palm Bch, FL. 33408 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MORRIS, ARTHUR 809 HUMMINGBIRD WAY @1C N PALM BEACH, FL 33408	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lynn Gold 510 Prosperity Farms Road, #6B North Palm Bch, FL. 33408 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Planck ~~PLANK~~, KELLY 805 HUNNIMGHIRD WAY @8D N. PALM BEACH, FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CREELMAN, PAUL 510 Prosperity Farms Rd #5B ~~807 HUMMING BIRRD WAY~~ ~~WEST~~ PALM BEACH, FL 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, JOHN 807 HUMMING BIRD WAY WEST PALM BEACH, FL 33405	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mike Weild 805 Hummingbird Way #4D North Palm Bch, FL. 33408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ (VP) 3/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #