
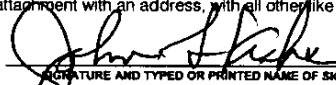


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 29, 2008 8:00 am
Secretary of State

02-29-2008 90018 015 ****61.25

DOCUMENT # 730644			
1. Entity Name SAN REMO TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1016 OCEAN DRIVE JUNO BEACH, FL 33408		Mailing Address P.O. BOX 30026 PALM BEACH GARDENS, FL 33420.	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 444 ZEPHYR WAY	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State JUNO BEACH FL	
Zip	Country	Zip	Country
33408		33408	USA
4. FEI Number 65-0094148		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KROHA, JOHN L 1016 OCEAN DRIVE JUNO BEACH, FL 33408		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
(Filing Fee is \$61.25) Due by May 1, 2008		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 NAME STREET ADDRESS CITY-ST-ZIP	P TEACHMAN, GERARD 1008 OCEAN DRIVE JUNO BEACH, FL 33408 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BACH, RICHARD 1902 OCEAN DRIVE JUNO BEACH, FL 33408 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BACH, RICHARD 1002 OCEAN DRIVE JUNO BEACH, FL 33408 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Y DONNA HOLLAND 104 OCEAN DR JUNO BEACH, FL 33408 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STS KROHA, JOHN L 1016 OCEAN DRIVE JUNO BEACH, FL 33408 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BEATRICE RICARDO 1904 OCEAN DRIVE JUNO BEACH, FL 33408 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:  JOHN L. KROHA		Date: 12 JAN 2008 Daytime Phone #: 561 694-0697	

Handwritten signature and date: [Signature] 1/23/08