

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 22, 2008 8:00 am**  
**Secretary of State**

05-08-2008 90101 001 15,496.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                                                                                                        |                                                                                                                                          |                                                             |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # 736302</b><br>1. Entity Name<br><b>FARNHAM "P" CONDOMINIUM ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                      |                                                                                                                        |                                                                                                                                          |                                                             |                                                                              |
| Principal Place of Business<br><b>COOCVE<br/>3501 WEST DRIVE<br/>DEERFIELD BEACH, FL 33442</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                      |                                                                                                                        | Mailing Address<br><b>COOCVE<br/>3501 WEST DRIVE<br/>DEERFIELD BEACH, FL 33442</b>                                                       |                                                             |                                                                              |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                      | 3. Mailing Address<br><br>Suite, Apt. #, etc.                                                                          |                                                                                                                                          | <b>66011593</b><br>                                         |                                                                              |
| City & State<br><br>Zip      Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                      | City & State<br><br>Zip      Country                                                                                   |                                                                                                                                          | 4. FEI Number<br><b>59-1921753</b>                          |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                                                                                                        |                                                                                                                                          | Applied For<br><input type="checkbox"/> Not Applicable      |                                                                              |
| 6. Name and Address of Current Registered Agent<br><br><b>CONDO OWNERS ORG OF CVE, INC<br/>3501 WEST DRIVE<br/>DEERFIELD BEACH, FL 33442</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                      |                                                                                                                        | 7. Name and Address of New Registered Agent<br><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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 _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                      |                                                                                                                        |                                                                                                                                          |                                                             |                                                                              |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                          | Make check payable to<br><b>Florida Department of State</b> |                                                                              |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                      |                                                                                                                        | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                    |                                                             |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | S<br>RAULT, PAUL<br>317 FARNHAM P<br>DEERFIELD BEACH, FL 33442       | <input checked="" type="checkbox"/> Delete                                                                             | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                       | SD<br>Russell Dodworth<br>331 FARNHAM 'P'<br>D.B.H 33442    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | VD<br>FERRERO, GENE<br>319 FARNHAM P<br>DEERFIELD BEACH, FL 33442    | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                       | Paul Rault<br>317 FARNHAM 'P'<br>D.B.H 33442                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | TD<br>ZAPPI, VINCENT<br>324 FARNHAM P<br>DEERFIELD BEACH, FL 33442   | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                       | William HUMRIGHOUSE<br>327 FARNHAM 'P'<br>D.B.H 33442       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PD<br>WELCH, WILLIAM<br>328 FARNHAM P<br>DEERFIELD BEACH, FL 33442   | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                       | RAYMOND COLLINS<br>330 FARNHAM 'P'<br>D.B.H 33442           | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | SD<br>SHAFFELL, NORMAN<br>316 FARNHAM P<br>DEERFIELD BEACH, FL 33442 | <input checked="" type="checkbox"/> Delete                                                                             | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                       |                                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                      | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>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: <u>William E. Welch</u> <u>William E. Welch</u> <u>4/2/08</u> <u>(954) 363-3993</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                      |                                                                                                                        |                                                                                                                                          |                                                             |                                                                              |