2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State
04-14-2006 90138 013 ****61.25

DOCUMENT # 738257

1. Entity Name
VILLAGE OF CEDARWOOD ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O HAWK-EYE MANAGEMENT,INC. 3901 NORTH FEDERAL HWY,SUITE 202 BOCA RATON, FL 33431	C/O HAWK-EYE MANAGEMENT,INC. 3901 NORTH FEDERAL HWY,SUITE 202 BOCA RATON, FL 33431

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01052006 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: 59-2073187 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

PATTI, PAUL
3901 NORTH FEDERAL HIGHWAY,SUITE 202
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

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 ______________________________

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	TD KAPLAN, MARVIN 7204 CEDARWOOD CIRCLE BOCA RATON, FL 33434	☐ Delete	SD Gold, Bernard 7670 Cedarwood Circle Boca Raton FL 33434	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	2VD BLAND, ARTHUR 7660 CEDARWOOD CIRCLE BOCA RATON, FL 33434	☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	SD SPANIER, IRVING 7627 CEDARWOOD CIRCLE BOCA RATON, FL 33434	☒ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	1VD HANDMAN, EDGAR 7581 CEDARWOOD CIRCLE BOCA RATON, FL 33434	☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PD STOMPEL, STEWART 7589 CEDARWOOD CIRCLE BOCA RATON, FL 33434	☐ Delete		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete		☐ 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: Marvin Kaplan / MK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR