

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739747

FILED
Jan 06, 2005
Secretary of State

Entity Name: 3228 TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3228 NE 14TH ST CSWY
7
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

3228 NE 14TH ST CSWY
7
POMPANO BEACH, FL 33062 US

New Mailing Address:

FEI Number: 65-0270359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KOPELOWITZ, HARVEY
800 E. BROWARD BLVD.
SUITE 505, CUMBERLAND BLDG.
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: RICE, KEVIN
Address: 3228 NE 14TH ST.-UNIT 1
City-St-Zip: POMPANO BEACH, FL 33062

Title: PD () Delete
Name: ROZEK, GORDON
Address: 3228 NE 14TH STREET # 7
City-St-Zip: POMPANO BEACH, FL 33062

Title: VPD () Delete
Name: HENN, BETTY
Address: 3228 NE 14TH STREET # 5
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: GARCIA, MARIA
Address: 3228 NE 14TH STREET # 4
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GORDON J. ROZEK

PR

01/06/2005

Electronic Signature of Signing Officer or Director

_____ Date