2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2006 8:00 am Secretary of State **DOCUMENT #742155** 05-01-2006 90401 012 ****61.25 BARWOOD CONDOMINIUM IV ASSOCIATION, INC. Principal Place of Business Mailing Address 23249 BARWOOD LANE NORTH 23249 BARWOOD LANE NORTH quuraive BLDG #5 BLDG #5 **BOCA RATON, FL 33428** BOCA RATON, FL 33428 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04212006 Chg-NP CR2E037 (11/05) Applied For City & State FEI Number 59-1832431 City & State Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent E WART SMEYDE, ALAN Street Address (P.O. Box Number is Not Acceptable) 23249 BARWOOD LN NORTH #208 BARWOOD LANE NO BOCA RATON, FL 33428 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 renstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. П Florida Department of State Added to Fees Due by May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. D ☐ Delete TITI F Change | ☐ Addition TITLE TETREV, BOB NAME NAME STREET ADDRESS 23249 BARWOOD LN NORTH #207 STREET ADDRESS BOCA RATON, FL 33428 CITY-ST-ZIP CITY-ST-ZIP PD Delete TITLE D Change ☐ Addition TITLE ZACHOS, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 23249 BARWOOD LN., N. #408 CITY_ST-7P CITY-ST-ZIP BOCA RATON, FL 33428 STD PD Change ☐ Delete TITLE ☐ Addition TITLE STEWART, FRED NAME NAME STREET ADORESS 23249 BARWOOD AVE. #403 STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33428 CITY-ST-ZIP SID TITLE Delete TITLE ■ Addition SMEYNE, ALAN NAME NAME STREET ADDRESS 23249 BARWOOD AVE, #208 STREET ADDRESS BOCA RATON, FL 33428 CITY-ST-7IP

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 attachmer

TITLE

NAME

NAME

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

SIGNATURE:

RICOTTILLI, JOHN

BOCA RATON, FL 33428

23249 BARWOOD LANE NW #409

CTTY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

NAME

☐ Change

☐ Change

☐ Addition

Addition

FILED