


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007 8:00 am
Secretary of State

03-21-2007 90036 050 ****61.25

DOCUMENT # 743697

1. Entity Name
THE VILLAS OF MONTEREY ASSOCIATION INC.



Principal Place of Business
 5995 BANNOCK TERR
 BOYNTON BCH, FL 33437-8447 US

Mailing Address
 5995 BANNOCK TERR
 BOYNTON BCH, FL 33437-8447 US

60026275



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01162007 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
59-1866775

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

O'CONNELL, EDWARD
 C/O CRYSTAL COMMUNITY MGMT, INC
 5995 BANNOCK TERR.
 BOYNTON BEACH, FL 33437

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 _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	COHEN, IRA	
STREET ADDRESS	5576 AINSLEY CT	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
TITLE	D	<input type="checkbox"/> Delete
NAME	WARREN, JOSEPH	
STREET ADDRESS	5512 AINSLEY COURT	
CITY-ST-ZIP	BOYNTON BCH, FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	LESSER, HERBERT	
STREET ADDRESS	5611 AINSLEY CT	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KRAMER, JUDITH	
STREET ADDRESS	5633 AINSLEY CT	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437	
TITLE	D	<input type="checkbox"/> Delete
NAME	KURZMAN, GLORIA	
STREET ADDRESS	5674 AINSLEY COURT	
CITY-ST-ZIP	BOYNTON BCH, FL	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	SCHEIBER, LAWRENCE	
STREET ADDRESS	5654 AINSLEY CT	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Howard Worstadt	
STREET ADDRESS	5505 Ainsley Ct.	
CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mark Yellen	
STREET ADDRESS	5534 Ainsley Ct.	
CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James Demos	
STREET ADDRESS	5703 Ainsley Ct.	
CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	VP AND S, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Judith Kramer	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: _____ **3-15-07**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #