## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Secretary of State **DOCUMENT #744668** 05-01-2006 90428 034 \*\*\*\*61.25 CRANBROOK TOWN HOME OWNERS ASSOCIATION, Principal Place of Business Mailing Address C/O BEACON PROPERTY MGMT INC 50018241 4649 NW 9 AVE 500 NE SPANISH RIVER BLVD STE 18 POMPANO BEACH, FL 33064 BOCA RATON, FL 33431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Number 59-2145387 Not Applicable Zip Country Zip. Country \$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 WILLIS, ERNEST W Street Address (P.O. Box Number is Not Acceptable) C/O BEACON PROPERTY MANAGEMENT INC 500 NE SPANISH RIVER BLVD STE 18 BOCA RATON, FL 33431 City 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 rainstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE VD TITLE Addition Delete ARRIETA Beth HOPHAN, SANDRA NAME NAME STREET ADDRESS 4677 NW 9TH AVENUE STREET ADDRESS Desefield beach, FL 33064 CITY-ST-ZIP POMPANO BCH, FL 33064 CITY-ST-ZIP TD D ☐ Change TITLE ☐ Detete TITLE Addition WOODHOUSE, FRED Baramord. NAME NAME STREET ADDRESS 4673 NW 9 AVE STREET ADDRESS FL 33064 CITY-ST-ZIP POMPANO BEACH, FL 33064 CITY-ST-ZIP PD ☐ Change TITLE □ Delete TITLE **Addition** ${oldsymbol{arGamma}}$ HERNANDEZ, ENRIQUE 510124, MARIENE 456500W 9 AUE. NAME NAME STREET ADDRESS 2046 N CONFERENCE DRIVE STREET ADDRESS Pompano brach. BOCA RATON, FL 334863145 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TIFLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 trusfee enhowered 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.

NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED** 

May 01, 2006 8:00 am