


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90019 027 ****61.25

DOCUMENT # 745800 1. Entity Name THORNHILL MEWS HOMEOWNERS' ASSOCIATION, INC.	
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Principal Place of Business 7253 ARCADIA CT BOCA RATON FL 33433 US	Mailing Address PO BOX 2611 BOCA RATON FL 33427 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

1st MOORE CR2E037 (10/06)

4. FEI Number 59-2029277	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JABLON, JOAN G. 7253 ARCADIA COURT BOCA RATON FL 33433	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 *Joan Jablon* Joan Jablon Secretary 3/22/07
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
T NAME: MESSBERG, CHANA STREET ADDRESS: 7204 CARMEL CT CITY-STATE-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	Vice President NAME: Messberg, Chana STREET ADDRESS: 7204 Carmel Court CITY-STATE-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VP NAME: LEFKOWITZ, LILA STREET ADDRESS: 7240 CARMEL COURT CITY-STATE-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete	Treasurer NAME: Lefkowitz, Lila STREET ADDRESS: 7240 Carmel Court CITY-STATE-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
P NAME: BROOKS, KEITH STREET ADDRESS: 7228 CARMEL CT CITY-STATE-ZIP: BOCA RATON FL 33433	<input checked="" type="checkbox"/> Delete	President NAME: Berger, Ira STREET ADDRESS: 7245 Carmel Court CITY-STATE-ZIP: Boca Raton, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
S NAME: JABLON, JOAN STREET ADDRESS: 7253 ARCADIA COURT CITY-STATE-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
VP NAME: FREEDMAN, CARA STREET ADDRESS: 7246 CARMEL COURT CITY-STATE-ZIP: BOCA RATON FL 33433	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Ira Berger* 3/22/07 (561) 447-9605
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #