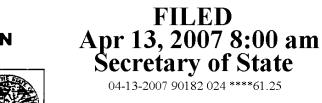
2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



1. Entity Nar	MENT # 745990 THE ASSOCIATION, INC.							0182 024 ****61	
Principal Place of Business PRIME MANAGEMENT GROUP, INC. 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487 Mailing Address PRIME MANAGEMENT GROUP, INC. 6300 PARK OF COMMERCE BLVD BOCA RATON, FL 33487						gyvv ⊪⊪⊪⊪	re mili té (seré 1974 pro ntes	H BERNE KINEN KINEN BIRNI BIRNI BIRNI BIRNI BIRNI	101 1 1 1111
Principal Place of Business - No P.O. Box # 3. Ma		3. Maiii	ailing Address						
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			01292007 C	hg-NP	CR2E037 (12/06)	
City & State		City	City & State		4. FEI Number 59-194006	66	1	pplied For ot Applicable	
Zip	Country	Zip		Country	,	5. Certificate of S	Status Desired	S8.75 Ad Fee Require	
	6. Name and Address of Current	t Registere	d Agent		•	7. Name and Add	dress of New R	egistered Agent	
BERNSTEIN, ARNIE 6300 PARK OF COMMERCE BLVD				Name (a Street Address		PD. Box Number is	Not Acceptable	e)	
BOCA RA	TON, FL 33487						· · · · · · · · · · · · · · · · · · ·		-,
	Tage A				2300 S	Parkof	3 Comm	FI Zip Co	<u>d</u> ,
8. The above	e named entity submits this statement for	or the purpo	se of changing its re	egistered of	ffice or registe	red agent, or both, in	the State of Flo	orida. I am familiar with,	and accept
	1								
	/ \/								
SIGNATUR	<u> </u>								
SIGNATUR	Signator, typed or printed name of registered agen	t and title it appli	cable. (NOTE:	Registered Ager	ent signature require	d when reinstating)		DATE	··
SIGNATUR		and title if appli	9. Election Camp	paign Finan	<u>.</u>	\$5.00 May Be Added to Fees	1	DATE ake check payable tida Department of S	
SIGNATURE 10.	Significal, typed or printed name of registered agen		9. Election Camp	paign Finan	ncing	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S	tate
	Signature typed or printed name of registered agen Filling Fee is \$61.25 Que by May 1, 2007		9. Election Camp	paign Finan	ncing	\$5.00 May Be Added to Fees	Flori	ake check payable t	tate
10. TITLE NAME	Filing Fee is \$61.25 Que by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA		9. Election Camp Trust Fund Co	paign Finansontribution. 11. TITLE NAME	ncing	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S	tate N 10
10.	Filing Fee is \$61.25 Que by May 1, 2007 OFFICERS AND Di		9. Election Camp Trust Fund Co	paign Finanontribution.	noting D	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S	tate N 10
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	Filing Fee is \$61.25 Que by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T		9. Election Camp Trust Fund Co	Daign Finans Ontribution. 11. TITLE NAME STREET ADI CITY- ST-Z TITLE	noting D	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S	tate N 10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Que by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484		9. Election Camp Trust Fund Co	Daign Finans Ontribution. 11. TITLE NAME STREET ADI CITY-ST-Z	DEPORTED TO	\$5.00 May Be Added to Fees	Flori	ake check payable t ida Department of S RS AND DIRECTORS IN	tate N 10 Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Filing Fee is \$61.25 Que by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS		9. Election Camp Trust Fund Co	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME	DRESS DRESS	\$5.00 May Be Added to Fees	Flori	ake check payable t ida Department of S RS AND DIRECTORS IN	tate N 10 Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	Signature typed or printed name of registered agen Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D		9. Election Camp Trust Fund Co	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-Z TITLE TITLE TITLE TITLE	DRESS DRESS	\$5.00 May Be Added to Fees	Flori	ake check payable t ida Department of S RS AND DIRECTORS IN	tate N 10 Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL		9. Election Camp Trust Fund Co	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-Z TITLE NAME	DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change	v 10
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E		9. Election Camp Trust Fund Co	Daign Financentribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI STREET ADI	DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change	v 10
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL		9. Election Camp Trust Fund Co	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-Z TITLE NAME	DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change	v 10
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME TITLE NAME TITLE NAME	Signature typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY		9. Election Camp Trust Fund Co Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-ZI TITLE NAME	DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change Change	V 10 Addition Addition Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	Signature typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY 235 CAPRI E		9. Election Camp Trust Fund Co Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY- ST- Z	DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change Change	V 10 Addition Addition Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Signature typed or printed name of registered agent Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY		9. Election Camp Trust Fund Co Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-Z TITLE NAME STREET ADI CITY- ST-ZI TITLE NAME	DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable tida Department of S RS AND DIRECTORS IN Change Change	V 10 Addition Addition Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY 235 CAPRI E DELRAY BEACH, FL 33484 P SIMON, MARVIN		9. Election Camp Trust Fund Co Delete Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME	DORESS DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable to ida Department of S RS AND DIRECTORS IN Change Change Change Change Change Change Change	\[\lambda 10 \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \]
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY 235 CAPRI E DELRAY BEACH, FL 33484 P SIMON, MARVIN 233 CAPRI E		9. Election Camp Trust Fund Co Delete Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI	DORESS DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	Flori	ake check payable to ida Department of S RS AND DIRECTORS IN Change Change Change Change Change Change Change	\[\lambda 10 \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \]
TITLE NAME STREET ADDRESS CITY- ST- ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY 235 CAPRI E DELRAY BEACH, FL 33484 P SIMON, MARVIN 233 CAPRI E DELRAY BEACH, FL 33484		9. Election Camp Trust Fund Co Delete Delete Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-ZI	DORESS DORESS DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG	FIOR	ake check payable to ida Department of S RS AND DIRECTORS IN Change Change Change	Late V 10 Addition Addition Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI S KAPLAN, LAURA 237 CAPRI E DELRAY BEACH, FL 33484 T SIMON, GLADYS 233 CAPRI E DELRAY BEACH, FL 33484 D STEIN, ETHEL 197 CAPRI E DELRAY BCH, FL 33484 VP GLASSMAN, SHIRLEY 235 CAPRI E DELRAY BEACH, FL 33484 P SIMON, MARVIN 233 CAPRI E		9. Election Camp Trust Fund Co Delete Delete Delete	Daign Financontribution. 11. TITLE NAME STREET ADI CITY-ST-Z TITLE NAME STREET ADI CITY-ST-ZI TITLE NAME STREET ADI	DORESS DORESS DORESS DORESS DORESS DORESS DORESS	\$5.00 May Be Added to Fees	FIOR	ake check payable to ida Department of S RS AND DIRECTORS IN Change Change Change Change Change Change Change	\[\lambda 10 \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \] \[\lambda Addition \]

12. Thereby 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.

CITY-ST-ZIP

SIGNATURE: 4

DELRAY BEACH, FL 33484

CITY - ST - ZIP

Davtime Phone #