## 2008 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

## **DOCUMENT #746177**

1. Entity Name

EASTVIEW VILLAGE SQUARE CONDOMINIUM



**FILED** Apr 07, 2008 8:00 am Secretary of State

04-07-2008 90026 006 \*\*\*\*61.25

ASSOCIA	ATION, INC.						
2920 FLORIDA BOULEVARD 2		Mailing Address 2710 FLORIA BLVD DELRAY BEACH, FL 33483					
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04042008	Chg-NP	CR2E037 (12/06	1
City & State		City & State		4. FEI Numb 59-212	per		Applied For
Zip	Country	Zip	Country		of Status Desired	¢0.75 .	Not Applicable dditional red
	6. Name and Address of Current	Registered Agent		7. Name and	d Address of New F	Registered Agent	
WEXEL, STEVEN			Name				
2710 FLORIDA BLVD DELRAY BEACH, FL 33483			Street Addre	ess (P.O. Box Numb	per is Not Acceptabl	e) 	
			City	<u> </u>		FL Zip Co	ode
	named entity submits this statement for ions of registered agent.	r the purpose of changing its re	egistered office or reg	gistered agent, or bo	oth, in the State of Fl	orida. I am familiar wit	h, and accept
SIGNATURE .	Signature, typed or printed name of registered egent	and title if apolicable. (NOTE: F	Registered Agent signature re	ouited when reinstelling)	·	DATE	
					<del></del>	<del></del>	
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution.				
	_			\$5.00 May I Added to Fees		lake check payable rida Department of	
10.	Due by May 1, 2008  OFFICERS AND DIF	Trust Fund Co		Added to Fees	Flo		State
TITLE	OFFICERS AND DIE	Trust Fund Co	11.	Added to Fees	HANGES TO OFFICE	rida Department of	State IN 10
TITLE NAME	OFFICERS AND DIE	Trust Fund Co	11. TITLE NAME L	Added to Fees	HANGES TO OFFICE	RS AND DIRECTORS  Change	State IN 10
TITLE	OFFICERS AND DIE	Trust Fund Co	11.  TITLE  NAME  STREET ADDRESS	Added to Fees  ADDITIONS/CH  D. T  ANN Mc Do  L9 20 Flori	HANGES TO OFFICE	rida Department of  RS AND DIRECTORS  Change	State IN 10
TITLE NAME STREET ADORESS	Due by May 1, 2008  OFFICERS AND DIF  D, V P  DIMITROFF, BOB  2900 FLORIDA BLVD + [19]  DELRAY BEACH, FL 33483	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees  ADDITIONS/CH  D, T  Ann Mc Do  1920 Flori Delray Bean	HANGES TO OFFICE NNell In Blud # .ch, FL 3	rida Department of  RS AND DIRECTORS  Change	State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2008  OFFICERS AND DIF  D; V P  DIMITROFF, BOB 2900 FLORIDA BLVD + 119  DELRAY BEACH, FL 33483  DYP D; S  SILBERSTEIN, SUSAN	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees  ADDITIONS/CH  D, T  ANN Mc Do  L9 20 Flore  Delray Bean  Say Huclille	HANGES TO OFFICE nnell da Blud # ch, FL 3	Change	State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2008  OFFICERS AND DIF  D; V P  DIMITROFF, BOB 2900 FLORIDA BLVD + [19]  DELRAY BEACH, FL 33483  DHP D; S  SILBERSTEIN, SUSAN 2920 FLORIDA BLVD 117	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS 2	Added to Fees  ADDITIONS/OF  FIND Mc Do  GROW Flore  Delray Bean  Cay Hudtle  GOO Flore	innell to Blud # ch, FL 3	Change	State IN 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2008  OFFICERS AND DIF  D, V P  DIMITROFF, BOB 2900 FLORIDA BLVD + 19  DELRAY BEACH, FL 33483  SILBERSTEIN, SUSAN 2920 FLORIDA BLVD 117  DELRAY BEACH, FL 33483	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees  ADDITIONS/OF  FIND Mc Do  GROW Flore  Delray Bean  Cay Hudtle  GOO Flore	HANGES TO OFFICE nnell da Blud # ch, FL 3	Change	State IN 10 Addition
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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.

SIGNATURE: