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

## Apr 18, 2007 8:00 am Secretary of State **DOCUMENT # 746865** 1. Entity Name 04-18-2007 90183 036 \*\*\*\*61 25 CAMINO REAL VILLAGE ASSOCIATION, INC. Principal Place of Business Mailing Address C/O CAMPBELL PROP. C/O CAMPBELL PROP. 1215 E. HILLSBORO BLVD. 1215 E. HILLSBORO BLVD. DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-2051967 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAMPBELL PROPERTY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 1215 E. HILLSBORO BLVD. DEERFIELD BEACH FL 33441 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 reinstaling) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 IIILE VP TITLE ☐ Addition Delete ☐ Change KAUFMAN, SUSAN NAME STREET ADDRESS STREET ADDRESS 5750 CAMINO DEL SOL CHY-SI-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** ☐ Delete HHI Change Addition NAME FIALKOW, JAN NAME STREET ADDRESS STREET ADDRESS 5901 CAMINO DEL DOL #103 CITY-ST-7IP CITY-ST-ZIP **BOCA RATON FL 33433** Addition TITLE Delete TITLE agenadica, Shirley Change NAME CORDONE, JO NAME 5850 CAMINO DOD SOP STREET ADDRESS STREET ADDRESS 5851 CAMINO DEL SOL #307 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** Addition Delete Change TITLE TITLE John NAME NAME 700 camino Del sol ROSS, PAUL STREET ADDRESS STREET ADDRESS 5701 CAMINO DEL SOL #102 OCA LATON FL 33433 CITY - ST - ZIP CITY-ST-ZIP **BOCA RATON FL 33433** ramer Jenna Fer 749 cAmino Del Sol Delete Addition TITLE HILE Change KIRKLAND, MELISSA NAME NAME STREET ADDRESS 5950 CAMINO DEL SOL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

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 eath; 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

JOHN SUR LEGORD - PLOSE ACE GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR 4/8/07

Davime Phone #

**FILED**