

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 16, 2008 8:00 am
Secretary of State

05-16-2008 90026 040 ****61.25

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1. Entity Name

CAMINO REAL VILLAGE ASSOCIATION, INC.



41

Principal Place of Business
C/O CAMPBELL PROP.
1215 E. HILLSBORO BLVD.
DEERFIELD BEACH FL 33441
US

Mailing Address
C/O CAMPBELL PROP.
1215 E. HILLSBORO BLVD.
DEERFIELD BEACH FL 33441
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2051967

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAMPBELL PROPERTY MANAGEMENT
1215 E. HILLSBORO BLVD.
DEERFIELD BEACH FL 33441

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. (For printed name, (NOTE: Registered Agent signature must be filed with this statement) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
VP	KAUFMAN, SUSAN	5750 CAMINO DEL SOL	BOCA RATON FL 33433				
P	FIALKOW, JAN	5901 CAMINO DEL SOL #103	BOCA RATON FL 33433				
D	GRENADICE, SHIRLEY	5850 CAMINO DEL SOL	BOCA RATON FL 33433				
T	BRANCKE, JOHN	5700 CAMINO DEL SOL	BOCA RATON FL 33433				
S	KRAMER, JENNIFER	5749 CAMINO DEL SOL	BOCA RATON FL 33433				

2. 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: See Susan Kaufman Vice Pres. April 28, 2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR