## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 02, 2006 8:00 am Secretary of State

05-02-2006 90158 039 \*\*\*\*61.25

ANNUAL REPORT				
DOCUMENT # 748246				
1. Entity Name  PALMS VILLAS TOWNHOUSE ASSOCIATION	INC			

		OCIATION, INC.					
11628 NW 30TH ST PC		Mailing Address PO BOX 9201 CORAL SPRINGS, FL 330	075				
2. Principal P	Place of Business	3. Mailing Address				01811 11111 81011 <del>1</del> 11	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		04272006 Ch	ng-NP CR2	E037 (4/06)	
City & State		City & State		4. FEI Number 59-275162	3	<u> </u>	oplied For
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	\$8.75 Add	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registere	d Agent	
ROGERS.	IOHN B		Name				
1881 UNIV			Street Addre	ss (P.O. Box Number is N	Not Acceptable)		
			City		F	L Zip Cod	e
	e named entity submits this statement for tions of registered agent.	r the purpose of changing its re	egistered office or regi	istered agent, or both, in	the State of Florida. I a	m familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent a	and little if applicable. (NOTE:	Registered Agent signature req	quired when reinstating)	DATE		<del></del>
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.				
	•			\$5.00 May Be Added to Fees		eck payable to artment of S	
10.	•	Trust Fund Co		Added to Fees		artment of S	tate
TITLE	OFFICERS AND DIE	Trust Fund Co	11.	Added to Fees	Florida Dep	artment of S	tate
TITLE NAME	OFFICERS AND DIE PD REID, CHRISTOPHER	Trust Fund Co	11. TITLE NAME	Added to Fees	Florida Dep	DIRECTORS IN	tate
TITLE	OFFICERS AND DIE	Trust Fund Co	11.	Added to Fees	Florida Dep	DIRECTORS IN	tate
TITLE NAME STREET ADDRESS	OFFICERS AND DIE PD REID, CHRISTOPHER 11628 NW 30TH ST	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Dep	DIRECTORS IN	tate
TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006  OFFICERS AND DIF PD REID, CHRISTOPHER 11628 NW 30TH ST CORAL SPRINGS, FL 33065 STD BRACKIN, LILLIAN	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Dep	DIRECTORS IN Change	tate  J 10 Addition
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12. I hereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aprl 27,2006

954-053-1738

Dayume Phone #