## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 24, 2007 **DOCUMENT#752134** Secretary of State

Entity Name: POINCIANA PLACE CONDOMINIUM ASSOCIATION V, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3150 VIA POINCIANA C/O A & G MANAGEMENT, 11360 FORTUNE CIRCLE

LAKE WORTH, FL 33467 US SUITE E-6A

WELLINGTON, FL 33414 US

**Current Mailing Address:** New Mailing Address:

3150 VIA POINCIANA 11924 FOREST HILL BLVD., #22-221 LAKE WORTH, FL 33467 US WELLINGTON, FL 33414

FEI Number: 59-2165370 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PMS CORP A & G MANAGEMENT SERVICES 3150 VIA POINCIANA 11924 FOREST HILL BLVD LAKE WORTH, FL 33467 US WELLINGTON, FL 33414 US

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.

SIGNATURE: GEORGE PALERMO 05/24/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Change () Addition () Delete

GREEN, ELLIOTT Name: Name: 3465 VIA POINCIANA Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

Title: () Delete Title: () Change () Addition

WEINBERGER, ALLEN Name: Name: Address: 3465 VIA POINCIANA Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

Title: () Delete Title: () Change () Addition

COHEN, MAURICE Name: Name: 3465 VIA POINCIANA Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELLIOTT GREEN DP 05/24/2007