

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 753014

1. Entity Name
**NEW WORLD TOWNHOUSE CONDOMINIUM
ASSOCIATION, INC**



Principal Place of Business
**235 10TH STREET
LAKE PARK, FL 33403-3132**

Mailing Address
**235 10TH STREET
LAKE PARK, FL 33403-3132**



03192007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2192246

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GROGAN, CHARLES M
203 10TH ST
LAKE PARK, FL 33403**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000677225
03/30/07-80095-023 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GRAEVE, CHRIS
STREET ADDRESS	10105 HUNT CLUB LANEQ
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	SD
NAME	RUTH, DEE ANN
STREET ADDRESS	205 10TH ST
CITY-ST-ZIP	LAKE PARK, FL
TITLE	TD
NAME	HILL, PATRICIA
STREET ADDRESS	209 10TH ST
CITY-ST-ZIP	LAKE PARK, FL
TITLE	D
NAME	GROGAN, CHARLES
STREET ADDRESS	1773 SW 43RD AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 33317
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #