AMENOED 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

ANNUAL REPORT (AR)					05-02-2005 90445 025 *****61.25 754156				
DOCUMENT # 754156 1. Entity Name					_		136		
VICTORIA SQUARE CONDOMINIUM		ASSOCIATION,INC.			-	ILED	00		
Principal Place of Business		Mailing Address		The same of the sa		16 AM 10:			
A&M PARTNERS, INC. 3475 NORTH HIATUS RD SUNRISE FL 33351 US		A&M PARTNERS, INC. 3475 NORTH HIATUS RD SUNRISE FL 33351 US			SEURET FALLAH	ARY OF STA ASSEE, FLO	ATE RIDA Nami errannear	IH e i oi itok	
2. Principal Place of Business		3. Mailing Address 3170 N Federal Hwy		lux					
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 100			1st MOOR	E CR2EC	37 (10/04)		
City & State		Lighthouse Point F		/= 4. F	El Number 59-2	029932	─	plied For t Applicable	
Ζip	Country	zή 33064	Country USA	5. 0	Certificate of Status	Desired [\$8.75 Add Fee Require		
-	6. Name and Address of Current	Registered Agent		7. N	ame and Address	of New Registered	d Agent		
· Name R					bert H. Smith				
A & M PARTNERS, INC. 3475 NORTH HIATUS ROAD			Stree	Street Address (P.O. Box Number is Not Acceptable)					
SUNRISE FL 33351					-				
				Suite	100	• ====	Zip Cod		
City					use Poi	nt F		64	
	named entity submits this statement fo	the purpose of changing its r	registered office	or registered ag	ent, or both, in the S	State of Florida. I ar	n familiar with,	and accept	
the obliga	tions of registered agent.	M = M + M							
SIGNATURE Signature, typed to punted name of registered agent and title of appticable (NOTE Registered Agent signature required when reinstating) DATE									
	Spiratore, typed or printed traine or registered against	INC. THE IT REPORTS IN CO.E.	regalered agent sig	Maicre regulation ministra	- Islamy)				
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.				_ ***	00 May Be d to Fees	Make Che Florida Depa	ck Payable artment of S		
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10. DILE	OFFICERS AND DIF		IITLE		UNS/CHANGES I	O OFFICERS AND I	DIRECTORS IN Change		
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CITY-SI-ŽIP	CORAL SPRINGS FL 33065		CITY-S1-ZIP						
BILE	PD .	☐ Defete	DINE				☐ Change	☐ Addition	
NAME	COLLINS, JOHN 3200 CORAL RIDGE DR.		NAME	_					
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CITY-ST-ZIP		☐ Celete	STREET ADORES CHY-ST-ZIP	10/2	JAN 18	2000	☐ Change	nodibbA 🗌	
CITY-ST-ZIP TITLE HAME		☐ Detete	STREET ADDRES CHY-ST-ZIP TISE NAME	10/2	JAN 18	2009	☐ Change	Addition	
CHY-SI-ZIP THLE HAME SIREEI ADDRESS CHY-SI-ZIP 12. I hereby indicated	certify that the information supplied with ton this report or supplemental report is	this filing does no: quality for true and that m	STREET ADDRES CHY-ST-ZIP HILE HAME STREET ADDRES CHY-ST-ZIP the exemption s by signature sha	tated in Section	JAN 18	Statutes Turther of de under oath; that	ert.fy that the in	ntormation or director	
CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP 12. I hereby indicated of the color the color in	cerity that the information supplied with ton this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address,	this filing does no: quality for true and accurate and that m wered to execute this report a	STREET ADDRES CHY-ST-ZIP HILE HAME STREET ADDRES CHY-ST-ZIP the exemption s by signature sha	tated in Section	JAN 18	Statutes Turther of de under oath; that	ert.fy that the in	ntormation or director	