

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90159 020 ****61.25

DOCUMENT # 756799

1. Entity Name
**STRATHMORE GATE-WEST HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**100 INDIANHEAD CIRCLE
ROYAL PALM BEACH, FL 33411**

Mailing Address
**100 INDIANHEAD CIRCLE
ROYAL PALM BEACH, FL 33411**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03062006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2075952

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

**BETTY MIROCHNICK
290 AMBER COURT
WEST PALM BEACH, FL 33411**

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 **VP** ☒ Delete
NAME **WASSERSTAIN, PHYLLIS**
STREET ADDRESS **497 IRON FORGE CT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **TREASURER** ☒ Change ☒ Addition
NAME **Wasserstein Phyllis**
STREET ADDRESS **497 Iron Forge Ct**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

TITLE **P** ☐ Delete
NAME **HIROCHNICK, BETTY**
STREET ADDRESS **290 AMBER COURT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **SPAIER, MICHEAL**
STREET ADDRESS **272 BEAVERDAM CT**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

TITLE **VICE President** ☐ Change ☒ Addition
NAME **Leonard Goldman**
STREET ADDRESS **452 Knollwood Ct.**
CITY-ST-ZIP **Royal Palm Beach Fl. 33411**

TITLE **S** ☒ Delete
NAME **IAROCCHI, PATRICIA**
STREET ADDRESS **233 BALO EAGLE COURT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **Secretary** ☒ Change ☒ Addition
NAME **Vincent Karp**
STREET ADDRESS **265 Beaverdam Ct.**
CITY-ST-ZIP **Royal Palm Beach FL 33411**

TITLE **D** ☒ Delete
NAME **SCHNEIDER, EDWARD**
STREET ADDRESS **325 PENNINGTON COURT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **Director** ☐ Change ☒ Addition
NAME **Bill Katie**
STREET ADDRESS **444 Midsummer Ct.**
CITY-ST-ZIP **Royal Palm Beach Fl. 33411**

TITLE **D** ☐ Delete
NAME **ARTHUR, PRIGAL**
STREET ADDRESS **438 MIDSUMMER CT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Phyllis Wasserstein

Office Manager