

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90412 025 ****70.00

DOCUMENT # 757126

1. Entity Name
FLAMINGO VILLAS ASSOCIATION, INC.



Principal Place of Business
 1050 N.W. 123RD TERR.
 PEMBROKE PINES, FL 33026

Mailing Address
 1050 N.W. 123RD TERR.
 PEMBROKE PINES, FL 33026

50012802



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03202006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2126258

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

TRIAI, CARLOS A
10570 NW 27 ST
STE 103
MIAMI, FL 33172

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VPD
 BELIN, JONATHAN L
 1383 NW 122 TERR
 PEMBROKE PINES, FL 33026 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PD
 VOYLES, JULIA
 1285 NW 122 TR
 PEMBROKE PINES, FL 33026 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 STD
 KAPLAN, SHIRLEY R
 12338 NW 13 CT
 PEMBROKE PINES, FL 33026 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 President
 Shirley Kaplan
 12338 NW 13 Ct. P.Pines FL 33026 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 vice president
 Debbie Alley
 1242 NW 123rd Avenue
 Pembroke Pines, FL 33024 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Secretary / Treasurer
 Diana Umpierre
 1105 NW 122 Terrace
 Pembroke Pines FL 33026 Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Change Addition

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:

Diana Umpierre Diana Umpierre / 6/06

Date

Daytime Phone #

(954)
 432-1128