2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 758303

1 Entity Name

ADAMS HOUSE HOMEOWNERS' ASSOCIATION, INC.



FILED Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90274 026 ****61.25

					OR HE IS					
ADAMS HOUSE C/O LIST MANAGEMENT ADA 223 SUNSET AVENUE, SUITE 110 223		ling Address AMS House C/O LIST MANAGEMENT 3 SUNSET AVENUE, SUITE 110 LM BEACH, FL 33480 US				121 53			((1 8) 	
2. Principal Place of Business - No P.O. Box # 3. M		3. Ma	Mailing Address							
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			04142007 Cr	ng-NP	CR2E037	(12/06)	
City & State		Ci	ty & State			4. FEI Number 59-238531	50 0005040			plied For
Zip	Country Z		ip Countr		try	5. Certificate of Status Desired			\$8.75 Additional Fee Required	
6. Name and Address of Current Registe		nt Register	ed Agent		, .	7. Name and Address of New Registered Agent				
					Name	The state of the s				
ANDERSON, JOHN 423 CHILEAN AVENUE WEST PALM BEACH, FL 33480					Street Address (P.O. Box Number is Not Acceptable)					
					City			FL	Zip Gode	0
9 The shows	named entity submits this statemen	for the our	one of changing its	ragistared	Loffing or rogint	orad agent or both in	the Ctate of Ele	rido Lamifo	nitine with	and accept
	ions of registered agent.	rior the purp	oose of changing its	registered	i onice or registi	ered agent, or both, in	ine State of Fig	onda. Tamtar	miliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if ap	plicable. (NOTE	: Registered A	Agent signature requir	red when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2007	 Election Campaign Fina Trust Fund Contribution. 		~ —	\$5.00 May Be Added to Fees			-		
10.	OFFICERS AND	DIRECTORS		11.		ADDITIONS/CHANGI	S TO OFFICE	RS AND DIRE	CTORS IN	10
TITLE	VPD		☐ Delete	TITLE		·			Change	Addition
	MATTHEWS, BETSY K		ET Delete					L	Unange	Addition
NAME	·			NAME						
STREET ADDRESS	417 CHILEAN AVE.				ADDRESS					
CITY-ST-ZIP	PALM BEACH, FL 33480			CITY-S	T-ZiP					
TITLE	SD									
NAME			☐ Delete	TITLE					Change	Addition
	DENTON, VICKIE		☐ Delete	TITLE					Change	Addition
STREET ADDRESS	DENTON, VICKIE		☐ Delete	NAME	ADDRESS			ſ	Change	Addition
STREET ADDRESS	421 CHILEAN AVE		Delete	NAME STREET	ADDRESS				Change	Addition
CITY-ST-ZIP	421 CHILEAN AVE PALM BCH., FL 00000,	<u></u>		NAME STREET CITY-S	•					
	421 CHILEAN AVE PALM BCH., FL 00000, TD	<u> </u>	☐ Delete	NAME STREET	•				Change Change	☐ Addition
CITY-ST-ZIP	421 CHILEAN AVE PALM BCH., FL 00000,			NAME STREET CITY-S	•					
CITY-ST-ZIP TITLE	421 CHILEAN AVE PALM BCH., FL 00000, TD	.		NAME STREET CITY-S TITLE NAME	•		_			
CITY-ST-ZIP TITLE NAME	421 CHILEAN AVE PALM BCH., FL 00000, TD BELISLE, MICHAEL	<u>.</u>		NAME STREET CITY-S TITLE NAME	ADDRESS					
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	421 CHILEAN AVE PALM BCH., FL 00000, TD BELISLE, MICHAEL 419 CHILEAN AVE PALM BEACH, FL 33480		☐ Delate	NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS			C	Change	☐ Addition
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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 fike empowered.

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Folke We Cheller & Signature and typed on printed name of signing officer or director

20 APR. 2007

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Daytime Phone #