

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759157

FILED
May 16, 2006
Secretary of State

Entity Name: ALPINE WOODS OF ROLLING HILLS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8188 SOUTH CORAL CIRCLE
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

8188 SOUTH CORAL CIRCLE
NORTH LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 65-0105462 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ERDLEE, ALAN
8188 SOUTH CORAL CIRCLE
NORTH LAUDERDALE, FL 33068 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHARON, BERNARD
Address: 4070 SW 84 TERRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: WILLIAMS, LINDA
Address: 8441 SW 40 CT
City-St-Zip: DAVIE, FL

Title: SD () Delete
Name: CODLING, EMMALOU
Address: 8401 SW 41ST ST.
City-St-Zip: DAVIE, FL

Title: D () Delete
Name: CHURCHILL, MARK R
Address: 3980 SW 84 TERRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: NEWBURG, CRAIG
Address: 4061 SW 82ND TERR
City-St-Zip: DAVIE, FL

Title: D () Delete
Name: ITZCHAKI, ZVI
Address: 8311 SW 41 STREET
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WATERS, HOWARD
Address: 8430 SW 40 COURT
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EMMA LOU CODLING

D/S

05/16/2006

Electronic Signature of Signing Officer or Director

Date