2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #764823



FILED
May 02, 2006 8:00 am
Secretary of State
05-02-2006 90229 048 ****61.25

	EDENS AT PALM-AIRE ATION, INC.	CONDOMI	MUIM	THE STATE OF THE S			50033 <i>1</i> 4	. 4		
6047 KIMBE	e of Business Ianagement Corp RLy BLVD STE W ILE, FL 33067 US	C/O D PO B	Address DELTA MANAGEME OX 590577 RA, FL 33359	NT CORP US			-			
2. Principal P	lace of Business	3. Maif	ing Address							
Suite, Apt. #, etc. S		Suite, Apt. #. etc.			02202006	Chg-NP	CR2E0	37 (11/05)		
City & State	e	City	y & State			4. FEI Number 59-2237	656			oplied For ot Applicable
Zip	Country	Zip	,	Country	1	5. Certificate o	f Status Desired		\$8.75 Add	
	6. Name and Address of C	urrent Registere	d Agent			7. Name and A	ddress of New R	egistered .	Agent	
PHILLIPS	EISENGER, & BROWN I	DΔ			lame					
4000 HOLI	LYWOOD BLVD #265-S DOD, FL 33021			S	Street Address (P.O. Box Number	is Not Acceptable)		
				-	City			FL	Zip Cod	<u>–</u>
	named entity submits this stater	ment for the purp	ose of changing its	registered o	office or register	red agent, or both	, in the State of Flo		familiar with,	and accept
the obligat	ions of registered agent.									,
SIGNATURE .	Signature, typed of printed name of register	ed agent and Itle if app	licable. (NOTE	: Registered Ag	ent signature required	i 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			k payable t tment of S	i
10.	Due by May 1, 2006	ND DIRECTORS		ontribution.		Added to Fees	Flor	ida Depar	tment of S	tate
10. TITLE	OFFICERS A	ND DIRECTORS		11.	de	Added to Fees		ida Depar	tment of S	tate
TITLE NAME STREET ADORESS	OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204		Trust Fund C	11. TITLE NAME STREET A	DDRESS DAG	Added to Fees	Flor	ida Depar	RECTORS IN	tate
TITLE NAME	OFFICERS A PD BROOKS, DOROTHY		Trust Fund C	11. TITLE NAME	DDRESS DAG	Added to Fees ADDITIONS/CHAI	Flor	ida Depar	RECTORS IN	tate
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204 FORT LAUDERDALE, FL D MARX, RICHARD		Trust Fund C	11. IIILE NAME STREET AL CITY-SI- IIILE NAME	DDRESS SATURATION OF STATUS	Added to Fees ADDITIONS/CHAI	Flor	ida Depar	RECTORS IN	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2006 OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204 FORT LAUDERDALE, FL D MARX, RICHARD 3010 NW 68 ST #102	33309	Trust Fund C	11. TITLE NAME STREET AL CHY-SI- TITLE	DDRESS FLO	Added to Fees ADDITIONS/CHAI	Flor	ida Depar	RECTORS IN	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2006 OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204 FORT LAUDERDALE, FL D MARX, RICHARD	33309	Delete Delete	11. IIILE NAME STREET AL CITY-SI- IIILE NAME STREET AL STREET AL	DDRESS FLO	Added to Fees ADDITIONS/CHAI	Flor	ida Depar	RECTORS IN	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2006 OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204 FORT LAUDERDALE, FL D MARX, RICHARD 3010 NW 68 ST #102 FORT LAUDERDALE, FL VD BOARD, TERRY	33309	Trust Fund C	Ontribution. 111. TITLE NAME STREET AI CITY-ST- TITLE NAME STREET AI CITY-ST- TITLE NAME	DDRESS PLAN DDRESS PLAN DDRESS PLAN ZIP ZZIP VD TEX	Added to Fees ADDITIONS/CHAI TO MAN COMMON	Flor	ida Depar	RECTORS IN Change	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Due by May 1, 2006 OFFICERS A PD BROOKS, DOROTHY 3040 NW 48 ST #204 FORT LAUDERDALE, FL D MARX, RICHARD 3010 NW 68 ST #102 FORT LAUDERDALE, FL VD BOARD, TERRY 3010 NW 68 ST #101	33309 33309	Delete Delete	IT. ITILE NAME STREET AL CITY-SI- TITLE NAME STREET AL CITY-ST- TITLE NAME STREET AL STREET AL	DORESS PLO DORESS PLO ZIP ZIP ZIP ZIP ZIP ZIP DORESS PLO TEX	Added to Fees ADDITIONS/CHAI TO MAN COMMON	FION NGES TO OFFICE WAY AND PLAY TO LAY TO L	TAND DI	RECTORS IN Change	1 10 Addition
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indicated on this reportor 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 received 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 algorithm with an address, with all other like empowered.

SIGNATURE:

THEE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #