2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 766182

1. Entity Name
HONEYPLACE HOMEOWNERS' ASSOCIATION, INC.

FILED
07 JUN 28 AM 7:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
LANDMARK MGMT. SVCS. 1002 COOPER CITY, FL 33330 US	LANDMARK MGMT. SVCS. 1002 COOPER CITY, FL 33330 US

2. Principal Place of Business	3. Mailing Address
Honeyplace HOA	Honeyplace HOA
Suite, Apt. #, etc. 8500 Pembroke Rd	Suite, Apt. #, etc. PO Box 848084
City & State Miramar, FL	City & State P. Pines, FL
Zip 33025 / Country US	Zip 33084 / Country US

12052006 Chg-NP CR2E037 (4/06)

4. FEI Number 59-2249510 — Applied For / Not Applicable

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
BAKALAR & EICHNER, P.A. WESTSIDE CORPORATE CENTER 150 SOUTH PINE ISLAND ROAD, SUITE 540 PLANTATION, FL 33324	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.

600105415756
07/03/07--01057--005 **61.25

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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	DP ☒ Delete	TITLE	DP ☒ Change ☐ Addition
NAME	CASTILLO, HAMILTON	NAME	Bostwick, Albert
STREET ADDRESS	1781 SW 87 TERR	STREET ADDRESS	941 SW 111 Ave
CITY-ST-ZIP	MIRAMAR, FL 33025	CITY-ST-ZIP	P. Pines, FL 33025
TITLE	DVP ☒ Delete	TITLE	DVP; DT ☐ Change ☒ Addition
NAME	BOSTWICK, ALBERT JR	NAME	Saulog, Henry
STREET ADDRESS	941 SW 71 AVE	STREET ADDRESS	1740 SW 83 Ter.
CITY-ST-ZIP	PEMBROKE, FL 33025	CITY-ST-ZIP	Miramar, FL 33025
TITLE	DT ☒ Delete	TITLE	D ☐ Change ☒ Addition
NAME	HIDALGO, VICTOR	NAME	Juan Yepes
STREET ADDRESS	1740 S 84 AVE	STREET ADDRESS	1730 SW 84 Ave
CITY-ST-ZIP	MIRAMAR, FL 33025	CITY-ST-ZIP	Miramar, FL 33025
TITLE	DS ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	JIMENNEZ, ELSA	NAME	
STREET ADDRESS	1731 SW 83 TERR	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33025	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GHANI, ABDUL	NAME	
STREET ADDRESS	1750 SW 83 TERR	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33025	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

JC 6/29

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: Al Bostwick 5/1/07 954.802.5494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #