


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90433 024 \*\*\*\*61.25

<b>DOCUMENT # 768378</b>		
1. Entity Name EGRET POND HOMEOWNERS ASSOCIATION, INC.		

Principal Place of Business EGRET POND HOA #3 STUART, FL 34994	Mailing Address C/O JJ PERSONALIZED MARY P.O. BX 1863 PALM CITY, FL 34991
---	--

2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>EGRET POND HOA</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>1111 SE FEDERAL HWY</i>	
City & State		City & State <i>STUART, FL</i>	
Zip	Country	Zip <i>34994</i>	Country

40090253



01102007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2290118	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BONAN, ELIZABETH ESQ 759 S FEDERAL HIGHWAY SUITE 212 STUART, FL 34994		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$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	TD TATJE, SHAWNAH 2639 SW EGRET POND PALM CITY, FL 34990 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>REISMAN, DOROTHY</i> <i>2501 SW Egret Pond</i> <i>PALM CITY, FL 34990</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHWARTZ, JERRY 4180 SW EGRET POND CIRCLE PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PTD</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHECA, KON 4120 SW EGRET POND TERR. STUART, FL 34994 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>FISCHLEY, BURTON</i> <i>2472 SW Egret Pond</i> <i>PALM CITY, FL 34990</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZIPP, LEONARD 4191 SW EGRET POND CIR PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>D</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BALL, DORW 2627 SW EGRET POND CIR PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VPD BALL, DORIS</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GANGI, MARK 4111 EGRET POND TERR PALM CITY, FL 34990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>SD</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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: *Mark Gangi* 04-24-07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

EGRET POND HOA ATTACHMENT

#768378

40090253

#768378

D

ADDITION

SMITH, GERALDINE  
2572 SW EGRET POND  
PALM CITY, FL 34990