

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90167 047 ****61.25

DOCUMENT # 770573

1. Entity Name
THE BARCLAY AT HAMPTONS WEST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
PHOENIX MANAGMNT SER
STE E250
FORT LAUDERDALE, FL 33319 US

Mailing Address
4780 N STATE RD 7
FORT LAUDERDALE, FL 33319 US

40067010



2. Principal Place of Business - No P.O. Box #
Phoenix Management Services
 Suite, Apt. #, etc.
4800 N State Rd 7 # F-105

3. Mailing Address
4800 N State Rd 7
 Suite, Apt. #, etc.
F-105

04092007 Chg-NP CR2E037 (12/06)

City & State
Lauderdale Lakes, FL
 Zip
33319
 Country
USA

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4. FEI Number
59-2516745
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
PHOENIX MANAGMNT SERVICES
~~4780 N ST RD 7~~
~~STE E 250~~
FORT LAUDERDALE, FL 33319

7. Name and Address of New Registered Agent
 Name **Phoenix Management Services**
 Street Address (P.O. Box Number is Not Acceptable)
4800 N. State Rd 7 # F-105
 City **Lauderdale Lake FL** Zip Code **33319**

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 Victoria M Naylor, Secy. BOB DATE 4/11/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STRAUSS, JACK 8010 HAMPTONS BLVD #505 N. LAUDERDALE, FL 33068 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NAYLOR, VICTORIA 8010 HAMPTONS BLVD #511 N LAUDERDALE, FL 33068 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WHITAKER, NADINE 8010 HAMPTON BL #207 NORTH LAUDERDALE, FL 33068 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VEREZIA, BILLY 8010 APT 3TT NORTH LAUDERDALE, FL 33068 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres Ardador Valle <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8010 Hampton # 2d N. Lauderdale 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secy Treas Naylor, Victoria <input type="checkbox"/> Change <input type="checkbox"/> Addition 8010 Hampton #511 N. Lauderdale, FL 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice Pres Whitaker, Nadine <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 8010 Hampton #207 N. Lauderdale 33068
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: Victoria M Naylor, Secy DATE 4/11/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR