


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED FLOR.  
Mar 17 2006 08:00 AM  
Secretary of State  
56 10-050  
TENTED

<b>DOCUMENT # F03000000709</b> 1. Entity Name <b>AUBURNDALE PROPERTIES, INC.</b>					
Principal Place of Business <b>50 TICE BOULEVARD WOODCLIFF LAKE NJ 07677</b>			Mailing Address <b>50 TICE BOULEVARD WOODCLIFF LAKE NJ 07677</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>04-3174313</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>SAFCHIK, JEFFREY 2801 S BAYSHORE DRIVE COCONUT GROVE FL 33133</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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)					
<div style="display: flex; justify-content: space-between;"> <div> <b>FILE NOW!!! FEE IS \$150.00</b>  <b>After May 1, 2006 Fee Will Be \$550.00</b>  <b>Make Check Payable to Florida Department of State</b> </div> <div>           9. Election Campaign Financing            Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> </div> </div>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PC DEMPSEY, JOSEPH J JR 50 TICE BLVD WOODCLIFF LAKE NJ 07677</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD WALL, SHALOM 50 TICE BLVD WOODCLIFF LAKE NJ 07677</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S DOBLIN, JEFFREY 50 TICE BLVD WOODCLIFF LAKE NJ 07677</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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.			U000000472284 03/29/06-80029-018 158.75		
<b>SIGNATURE:</b> _____			3/14/06		