

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90038 035 ****61.25

DOCUMENT # N00000005411 1. Entity Name VALENCIA FALLS HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business C/O FIRST CHOICE MGMT 6401 CONGRESS AVE STE 140 BOCA RATON, FL 33487			Mailing Address C/O FIRST CHOICE MGMT 6401 CONGRESS AVE STE 140 BOCA RATON, FL 33487		
2. Principal Place of Business - No P.O. Box # 40 Prime Management Group Suite, Apt. #, etc. 10300 Park of Commerce Blvd		3. Mailing Address 13375 Valencia Gwvrd Blvd. Suite, Apt. #, etc.			
City & State Boca Raton FL		City & State Delray Beach, FL		4. FEI Number 65-1046132	
Zip 33487		Country Palm Beach		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LIPPMAN, STEVE FIRST CHOICE MGMT GROUP, INC 6401 CONGRESS AVE STE 140 BOCA RATON, FL 33487			7. Name and Address of New Registered Agent Name Lou Caplan, Esq. Sachs & Sox Street Address (P.O. Box Number is Not Acceptable) 301 Yamato Road Suite 4150 City Boca Raton FL Zip Code 33431		
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 <u>Lou Caplan, Esq.</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		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 NAME STREET ADDRESS CITY-ST-ZIP	P PORTUGAL, MICHAEL 13534 BARCELONA LAKE CIR. DELRAY BEACH, FL 33446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Berger, Edward 7012 FRANCISCO BEND DRWC Delray Beach, FL 33446	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LIPON, BARBARA 13449 BARCELONA LAKE CIR DELRAY BEACH, FL 33446	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Telsey, Joan 13659 Granada mist way Delray Beach, FL 33446	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BERGER, EDWARD 7012 FRANCISCO BEND DR. DELRAY BEACH, FL 33446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Londall, Ira 13677 Granada mist Delray Beach, FL 33446	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TELSEY, JOAN 13659 GRANADA MIST WAY DELRAY BEACH, FL 33446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Davidson, Richard 7132 Francisco Bend Drwc Delray Beach, FL 33446	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANT, BOB 7476 MOROCCA LAKE DR. DELRAY BEACH, FL 33446	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Portugal, Michael 13534 Barcelona Lake Cirwc Delray Beach, FL 33446	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GITTERS, MARK 7156 FRANCISCO BEND DR. DELRAY BEACH, FL 33446	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Frost, Anne 13207 Veera Lake Circle Delray Beach, FL 33446	☐ Change ☒ 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: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>3/28/08</u> Daytime Phone # <u>561-965-9628</u>		