2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2006 8:00 am
Secretary of State
07-21-2006 90024 007 ****61.25

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1. Entity Name
PARK TERRACES PROPERTY OWNERS' ASSOCIATION, INC.

50022844

Principal Place of Business	Mailing Address
6835 VIENTO WAY BOCA RATON, FL 33433	7273 W. ATLANTIC AVE. DELRAY BEACH, FL 33446

07112006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
1495 North Park Drive	1495 North Park Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Weston, Florida	City & State: Weston, Florida
Zip: 33326 Country:	Zip: 33326 Country:

4. FEI Number 65-1096940 ☐ 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. 150 SOUTH PINE ISLAND RD., 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.

SIGNATURE _____
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 September 6, 2006

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	PD WILLIAMS, SCOTT 2458 NW 98TH LANE SUNRISE, FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SATTY, PAUL 9840 NW 24TH COURT SUNRISE, FL 33332	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SHORTY, MELBY 2428 NW 99TH WAY SUNRISE, FL 33332	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Linda Wright 2310 NW 98 Lane Sunrise, FL 33322	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FLEXMAN, JUDITH 2400 NW 99TH WAY SUNRISE, FL 33332	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EBSARY, NORM 2416 NW 99TH WAY SUNRISE, FL 33332	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Francis, Nikolai 2120 NW 99 Way Sunrise, FL 33322	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Retzloff, Wendy 2030 NW 99 Way Sunrise, FL 33322	☐ 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: Paul Satty Paul Satty 7/18/06 954-741-860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #