

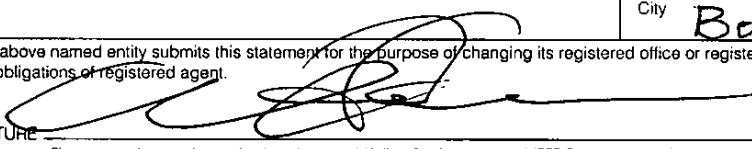
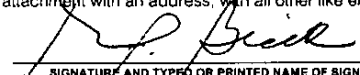


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90215 041 ****70.00

DOCUMENT # N00000007940 1. Entity Name PARADISIO AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business DICKINSON MANAGEMENT, INC 400 TONEY PENNA DRIVE JUPITER, FL 33458			Mailing Address 400 TONEY PENNA DRIVE JUPITER, FL 33458		
2. Principal Place of Business Suite, Apt. #, etc. 21045 Commercial Trail		3. Mailing Address Suite, Apt. #, etc. 21045 Commercial Trail			
City & State Boca Raton, FL		City & State Boca Raton		04062006 Chg-NP CR2E037 (11/05)	
Zip 33486		Zip 33486		4. FEI Number 65-1058338	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DANNER, MANFRED DICKINSON MANAGMENT, INC 400 TONEY PENNA DRIVE JUPITER, FL 33458			7. Name and Address of New Registered Agent Name William K. Isaacson Street Address (P.O. Box Number is Not Acceptable) Ole Lang management Co. 21045 Commercial Trail City Boca Raton FL Zip Code 33486		
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  DATE 4-18-06					
Filing Fee is \$61.25 Due by May 1, 2006		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					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLICK, JAN <input type="checkbox"/> Delete 132 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD UNGARO, RONALD <input type="checkbox"/> Delete 101 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ITKIN, LARRY <input type="checkbox"/> Delete 113 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EGAN, JOHN <input type="checkbox"/> Delete 128 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TAMIS, CLIFF <input type="checkbox"/> Delete 129 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ITKIN, LARRY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 113 VIA PARADISIO PALM BEACH GARDENS, FL 33418				
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				
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:  Jan P. Blick 4/11/06 561-691-4354					