

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 JUL 31 AM 11:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07102006 Chg-NP CR2E037 (4/06)

4. FEI Number
59-2829089

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

DOCUMENT # N01771

1. Entity Name
MALIBU VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
3125 CORAL RIDGE DRIVE
CORAL SPGS., FL 33065

Mailing Address
324 NW 105 TERR
CORAL SPRINGS, FL 33071 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

ZUKOWSKI, DANIEL C.
324 NW 105 TERR
CORAL SPGS, FL 33071

7. Name and Address of New Registered Agent

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

Amended AR is \$61.25

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	PD	<input type="checkbox"/> Delete
NAME	ZUKOWSKI, DANIEL C.	
STREET ADDRESS	324 NW 105 TER	
CITY-ST-ZIP	CORAL SPGS, FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BERGER, BETTY	
STREET ADDRESS	3111 CORAL RIDGE DR.	
CITY-ST-ZIP	CORAL SPGS, FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	DANIEL C. ZUKOWSKI	
STREET ADDRESS	324 NW 105 TERR	
CITY-ST-ZIP	CORAL SPRINGS, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Steve Mossie	
STREET ADDRESS	3113 CORAL RIDGE DR.	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ASITHA NAIR	
STREET ADDRESS	3111 CORAL RIDGE DR.	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Daniel C. Zukowski Date: 7/27/07 Daytime Phone #: 9347550707