

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90286 007 ****61.25

DOCUMENT # N01883

1. Entity Name
HUNTINGTON LAKES SECTION THREE ASSOCIATION, INC.



Principal Place of Business
314 NE 3RD STREET
BOYNTON BEACH, FL 33435 US

Mailing Address
314 NE 3RD STREET
BOYNTON BEACH, FL 33435 US

40078620



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02062007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2463597

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

ROSEN, SYLVIA
7240 HUNTINGTON LANE
DELRAY BEACH, FL 33446

Name Rosen, SYLVIA, Secy.
Street Address (P.O. Box Number is Not Acceptable)
7240 Huntington Lane #608
City DELRAY BEACH FL Zip Code 33446

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

Sylvia Rosen
Signature, typed or printed name of registered agent and title if applicable.

- SYLVIA ROSEN, Secy.

4/5/07
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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 ☐ Delete
NAME SILVERMAN, MARION
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE VPD ☐ Delete
NAME STEINBERG, SEYMOUR
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE TD ☒ Delete
NAME ROY, HELEN
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE S ☐ Delete
NAME ROSEN, SYLVIA
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE D ☐ Delete
NAME HILLMAN, MORTON
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

TITLE D ☐ Delete
NAME KROOT, HAROLD
STREET ADDRESS 2328 S. CONGRESS AVE, SUITE 2A
CITY-ST-ZIP WEST PALM BEACH, FL 33406

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Pres. ☒ Change ☐ Addition
NAME marion silberman
STREET ADDRESS 7286 Huntington Lane #104
CITY-ST-ZIP Delray Beach, FL 33446

TITLE Vice Pres. ☒ Change ☐ Addition
NAME Seymour Steinberg
STREET ADDRESS 14476 Amberly Lane #506
CITY-ST-ZIP Delray Beach, FL 33446

TITLE TD ☒ Change ☒ Addition
NAME Snames, JACK
STREET ADDRESS 7240 Huntington Lane #605
CITY-ST-ZIP Delray Beach, FL 33446

TITLE Sec. ☒ Change ☐ Addition
NAME Rosen, Sylvia
STREET ADDRESS 7240 Huntington Lane #608
CITY-ST-ZIP Delray Beach, FL 33446

TITLE Dir. ☒ Change ☐ Addition
NAME Morton Hillman
STREET ADDRESS 7267 Huntington Lane
CITY-ST-ZIP Delray Beach, FL 33446

TITLE Div. ☐ Change ☒ Addition
NAME Beyer, Selma
STREET ADDRESS 14476 Amberly Lane #407
CITY-ST-ZIP Delray Beach, FL 33446

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:

Sylvia Rosen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/07
Date

(561) 446-0796
Daytime Phone #

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ATTACHMENT

DOCUMENT # N01883					
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2463597	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROSEN, SYLVIA 7240 HUNTINGTON LANE DELRAY BEACH, FL 33446				7. Name and Address of New Registered Agent Name: Rosen, Sylvia Secy. Street Address (P.O. Box Number is Not Acceptable): 7240 Huntington Lane #608 City: Delray Beach FL Zip Code: 33446	
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>Sylvia Rosen - Sylvia Rosen, Secy.</u> DATE: <u>4/5/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SILVERMAN, MARION 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President MARION Silverman 7286 Huntington Lane #104 Delray Beach, FL 33446	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD STEINBERG, SEYMOUR 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Steinberg, Seymour 14476 Amberly Lane #508 Delray Beach, FL 33446	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROY, HELEN 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Snames, JACK 7240 Huntington Lane #605 Delray Beach, FL 33446	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROSEN, SYLVIA 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Sylvia Rosen 7240 Huntington Lane #608 Delray Beach, FL 33446	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILLMAN, MORTON 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir. Hillman, Morton 7267 Huntington Lane #303 Delray Beach, FL 33446	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KROOT, HAROLD 2328 S. CONGRESS AVE, SUITE 2A WEST PALM BEACH, FL 33406	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir. Kroot, Harold 14426 Amberly Lane #405 Delray Beach, FL 33446	<input checked="" 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: <u>Sylvia Rosen - Sylvia Rosen, Secy.</u>				Date: <u>4/5/07</u> (561) 496-0796	

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