

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N02000001398

1. Entity Name
VILLAGE OF YARDLEY NEIGHBORHOOD ASSOCIATION, INC.



FILED

06 DEC 11 AM 10:11

CLERK OF THE STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
C/O CCM, INC.
10034 W MCNAB ROAD
TAMARAC, FL 33321

Mailing Address
C/O CCM, INC.
10034 W MCNAB ROAD
TAMARAC, FL 33321

2. Principal Place of Business
4373 Rock Island Rd
Suite, Apt. #, etc.

3. Mailing Address
4373 Rock Island Rd
Suite, Apt. #, etc.

11132006 REIN-NP CR2E099 (11/05) 06

City & State
Lauderhill FL

City & State
Lauderhill, FL

Zip
33319

Country
Broward

Zip
33319

Country
Broward

4. FEI Number
01-0628253

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
MILES, JAMES R
10034 W MCNAB ROAD
TAMARAC FL 33321

7. Name and Address of New Registered Agent
Name
Campan Property Management
Street Address (P.O. Box Number is Not Acceptable)
4373 Rock Island Road
Lauderhill
City
FL Zip Code
33319

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 *Norman Krupin* DATE *11/27/06*

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$61.25
After January 1, 2007, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONAL OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GROFNOFF, HARRY 10034 W MCNAB ROAD 7600 NOB HILL RD TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres NORMAN KRUPIN 4373 ROCK ISLAND ROAD LAUDERHILL FLORIDA 33319 <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRUPIN, NORMAN 10034 W MCNAB ROAD TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP IRWIN ROSENTHAL 4373 ROCK ISLAND ROAD LAUDERHILL FLORIDA 33319 <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DONATELLI, RONALD 10034 W MCNAB ROAD TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec GREGG JAFEE 4373 ROCK ISLAND ROAD LAUDERHILL FLORIDA 33319 <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SHER, MORTON 10034 W MCNAB ROAD TAMARAC, FL 33321 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500082740575 12/12/06--01029--012 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TIEGER, PAULA 10034 W MCNAB ROAD TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RONALD DONATELLI 4373 ROCK ISLAND ROAD LAUDERHILL FLORIDA 33319 <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAUSS, SAM 10034 W MCNAB ROAD TAMARAC, FL 33321 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BARBARA BONE 4373 rock island road LAUDERHILL FLORIDA 33319 <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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: *Norman Krupin* DATE: *11/14/06*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #