
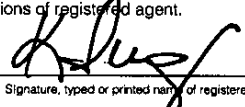
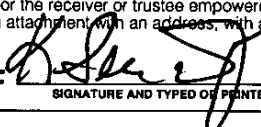


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90173 016 ****70.00

DOCUMENT # N02000005072 1. Entity Name THE WESTON COMMONS PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 150 E. PALMETTO PARK RD SUITE 340 BOCA RATON, FL 33432			Mailing Address 150 E. PALMETTO PARK RD SUITE 340 BOCA RATON, FL 33432		
2. Principal Place of Business 120 E. PALMETTO PARK RD Suite, Apt. #, etc. 410		3. Mailing Address 120 E. PALMETTO PARK RD Suite, Apt. #, etc. 410			
City & State BOCA RATON FL Zip 33432		City & State BOCA RATON, FL Zip 33432		4. FEI Number 20-1041908	
Country PB		Country PB		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SIMIGRAN, KENNETH H 150 E. PALMETTO PARK RD #340 BOCA RATON, FL 33432				7. Name and Address of New Registered Agent Name PLEASE NOTE OUR NEW ADDRESS: Street Address (P.O. Box Number is Not Acceptable) SIMIGRAN, KENNETH H. 120 E. PALMETTO PARK ROAD SUITE 410 BOCA RATON, FL 33432	
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 _____ <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, 2005		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	D <input type="checkbox"/> Delete SIMIGRAN, KENNETH H 150 E. PALMETTO PARK RD #340 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 120 E. PALMETTO PARK RD #410 BOCA RATON, FL 33432-4835	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DOUGLAS, STEPHEN M 150 E. PALMETTO PARK RD #340 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 120 E. PALMETTO PARK RD #410 BOCA RATON, FL 33432-4835	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SHAHAM, JACOB 11377 S.W. 84TH STREET MIAMI, FL 33173		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"/> Delete		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"/> Delete		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 exemption stated in Section 119.07(3)(i), 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: 					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					

14003735



04242005 Chg-NP CR2E037 (10/03)

PLEASE NOTE OUR NEW ADDRESS:

SIMIGRAN, KENNETH H.

120 E. PALMETTO PARK ROAD

SUITE 410

BOCA RATON, FL 33432

FL

Zip Code

(561) 394-7400

P5162

Common ch 1124