

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000661

FILED
Apr 06, 2007
Secretary of State

Entity Name: ABACOA WK5 NORTH PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

515 EAST LAS OLAS BLVD.
SUITE 550
FORT LAUDERDALE, FL 33301

Current Mailing Address:

3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410

New Mailing Address:

515 EAST LAS OLAS BLVD.
SUITE 550
FORT LAUDERDALE, FL 33301

FEI Number: 65-1174178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGSERV CORP.
3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

HAMBY, LOUIS L ESQUIRE
340 ROYAL POINCIANA WAY
SUITE 321
PALM BEACH, FL 33480 US

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.

SIGNATURE: LOUIS L. HAMBY III, ESQUIRE

04/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NOTO, MICHAEL A
Address: 3801 PGA BOULEVARD, SUITE 606
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DVPS () Delete
Name: BARRY, STEVEN
Address: 3801 PGA BOULEVARD, SUITE 606
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DVAS () Delete
Name: DUNLAY, BRIAN
Address: 3801 PGA BOULEVARD, SUITE 606
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BATTLE, MICHAEL J III
Address: 515 EAST LAS OLAS BLVD., STE 550
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DVP (X) Change () Addition
Name: QUARELS, STEVE
Address: 1004 CONGRESSIONAL WAY
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: DS (X) Change () Addition
Name: LA ROCCA, ARLENE M
Address: 515 EAST LAS OLAS BLVD., STE 550
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DT () Change (X) Addition
Name: CHIN, CAROL
Address: 2800 PONCE DE LEON BLVD., BOX 8
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J. BATTLE, III

DP

04/06/2007

Electronic Signature of Signing Officer or Director

Date