

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003513

FILED
Jan 05, 2006
Secretary of State

Entity Name: POINCIANA PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1309 NE 2ND STREET
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

1309 NE 2ND STREET
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 20-1308647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARTHEMER, AARON
1309 NE 2ND STREET
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARTHEMER, AARON
Address: 1309 NE 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: VP () Delete
Name: MAHAN, MARY BETH
Address: 1313 NE 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: T () Delete
Name: COUCH, GEORGE
Address: 1315 NE 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JOHNS, BLANCA
Address: 1311 NE 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: T (X) Change () Addition
Name: HENNEKENS, JENNIFER
Address: 1313 NE 2ND STREET
City-St-Zip: FT. LAUDERDALE, FL

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: AARON R PARTHEMER

P

01/05/2006

Electronic Signature of Signing Officer or Director

Date