## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 16, 2007 8:00 am Secretary of State

1. Entity Nam	MENT # N0300000 REEK AT IBIS HOMEOWN	04	-16-2007 90	0053 020 ****61	.25		
275 TONEY PENNA RD 27 Suite 7 Su		SUITE 7	275 TONEY PENNA RD		[8]   <b>  8</b>      <b>  8</b>      <b>  8 </b>		IIIKRE RA KERA
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03222007 Ct	ng-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 20-405190	9		oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of St.	atus Desired	□ \$8.75 Add Fee Require	
	6. Name and Address of Curre	nt Registered Agent	Name	7. Name and Add	ress of New Re	egistered Agent	-
MATTHEWS-GRAY, JUDY 1000 CLINT MOORE RD SUITE 110				dress (P.O. Box Number is I	Not Acceptable	·)	
BOCA RA	TON, FL 33487-2847		City			FL Zip Cod	le
8. The above	named entity submits this statement	for the purpose of changin	ig its registered office or re	egistered agent, or both, in	the State of Flo		and accept
SIGNATURE	lions of registered agent.  Signature, typed or printed name of registered age	ant and title if applicable.	(NOTE: Registered Agent signature	required when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2007							
			n Campaign Financing und Contribution.	\$5.00 May Be Added to Fees	ŀ	ake check payable t ida Department of S	
10.	OFFICERS AND I	Trust Fu		Added to Fees	Flori		tate
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Due by May 1, 2007	Trust Fu	and Contribution.	Added to Fees	Flori	ida Department of S	tate
TITLE NAME STREET ADDRESS	OFFICERS AND I PD WALSH, NANCY 1000 CLINT MOORE RD, STE	Trust Fu DIRECTORS  Delete  110  Delete	11. TITLE NAME STREET ADDRESS	Added to Fees	Flori	ida Department of S	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2007  OFFICERS AND II PD WALSH, NANCY 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847 VD BORG, DEAN 1000 CLINT MOORE RD, STE	Trust Functions  Delete  110  Delete  110  Delete  110	11. 11LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Flori	Ida Department of S  RS AND DIRECTORS IN  Change	tate  1 10  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2007  OFFICERS AND II PD WALSH, NANCY 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847  VD BORG, DEAN 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847  STD MATTHEWS-GRAY, JUDY 1000 CLINT MOORE RD, STE	Trust Functions  Delete  110  Delete  110  Delete  110  Delete  110	TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Added to Fees	Flori	Ida Department of S  RS AND DIRECTORS IN Change  Change	tate  √ 10  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD WALSH, NANCY 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847 VD BORG, DEAN 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847 STD MATTHEWS-GRAY, JUDY 1000 CLINT MOORE RD, STE BOCA RATON, FL 334872847 D FINKELSTEIN, RICHARD 1000 CLINT MOORE RD, STE	Trust Functions    Delete   110   Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110     Delete   110       Delete   110       Delete   110	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees	Flori	Ida Department of S  RS AND DIRECTORS IN  Change  Change	tate 10 Addition Addition
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Thereby certify that the information supplied with this filing does not quality 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. Judy MATTHEWS - GARY

IGNATURE:

| Signature Mo Type or Printed Name of Signing Officer or printed Na

SIGNATURE: