

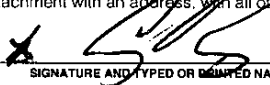


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90438 009 \*\*\*\*61.25

<b>DOCUMENT # N03000005378</b> 1. Entity Name <b>VINTAGE CREEK COMMUNITY ASSOCIATION, INC.</b>					
Principal Place of Business <b>825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071</b>			Mailing Address <b>825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071</b>		
2. Principal Place of Business <b>At W PROP. MGMT</b> Suite, Apt. #, etc. <b>P.O. Box 15624</b> City & State <b>PLANTATION FL</b> Zip <b>33318</b> Country <b>USA</b>		3. Mailing Address <b>At W PROP MGMT</b> <b>P.O. Box 15624</b> Suite, Apt. #, etc. City & State <b>PLANTATION FL</b> Zip <b>33318</b> Country <b>USA</b>			
03292005 Chg-NP CR2E037 (10/03)				4. FEI Number <b>38-3683176</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>LEOPOLD, KORN &amp; LEOPOLD 20801 BISCAYNE BOULEVARD SUITE 501 AVENTURA, FL 33180</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>PERRY, CRAIG</b> <input type="checkbox"/> Delete <b>825 CORAL RIDGE DRIVE</b> <b>CORAL SPRINGS, FL 33071</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>STIEGELE, ROBERT</b> <input type="checkbox"/> Delete <b>825 CORAL RIDGE DRIVE</b> <b>CORAL SPRINGS, FL 33071</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>BOVIO, STEVEN</b> <input type="checkbox"/> Delete <b>825 CORAL RIDGE DRIVE</b> <b>CORAL SPRINGS, FL 33071</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>GLUCKMAN, NICHOLAS</b> <input type="checkbox"/> Delete <b>825 CORAL RIDGE DRIVE</b> <b>CORAL SPRINGS, FL 33071</b>		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.					
<b>SIGNATURE:</b>  <span style="float: right;">x 4/25/05</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					