


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90023 012 ****61.25

DOCUMENT # N03000008517					
1. Entity Name SAILFISH COVE NEIGHBORHOOD ASSOCIATION, INC.					
Principal Place of Business G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD., STE 309 LAKE WORTH, FL 33463 US			Mailing Address G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD., STE 309 LAKE WORTH, FL 33463 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 84-1627031	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent LEVINE, JAY S. 3300 PGA BLVD SUITE 530, 4TH FLOOR PALM BEACH GARDENS, FL 33410				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006			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 VP NAME LEINWOL, JERALD STREET ADDRESS 2364 SAILFISH COVE DR CITY-ST-ZIP WEST PALM BEACH, FL 33411	<input type="checkbox"/> Delete		TITLE VP2 NAME Liberta, Angelo STREET ADDRESS 2355 Sailfish Cove Dr CITY-ST-ZIP West Palm Bch, FL 33411	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE VP NAME LIBERTA, BERNICE STREET ADDRESS 2384 SAILFISH COVE DR CITY-ST-ZIP WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Delete		TITLE P.D NAME Liberta, Bernice STREET ADDRESS 2384 Sailfish Cove Dr. CITY-ST-ZIP West Palm Bch, FL 33411	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T NAME PANAGACOS, CHRISTOS STREET ADDRESS 2414 SAILFISH COVE DR CITY-ST-ZIP WEST PALM BEACH, FL 33411	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P NAME LEVY, SANFORD STREET ADDRESS 2444 SAILFISH COVE DRIVE CITY-ST-ZIP WEST PALM BEACH, FL 33411	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME WHITE, DONALD STREET ADDRESS 2455 SAILFISH COVE DRIVE CITY-ST-ZIP WEST PALM BEACH, FL 33411	<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 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.					
SIGNATURE: <i>Bernice A. Liberta</i>			3/9/06		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		