## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 03, 2006 8:00 am Secretary of State DOCUMENT # N03000010711 04-03-2006 90374 026 \*\*\*\*61.25 ABINGTON WOODS PROPERTY OWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address **1974 14TH AVENUE** PO BOX 1328 VERO BEACH, FL 32960 VERO BEACH, FL 32961-1328 US 3. Mailing Address 2. Principal Place of Business 3885-2070 Street Suite, Apt. #, etc Suite, Apt. #, etc. 03162006 Chg-NP CR2E037 (11/05) 202 City & State 4. FEI Number 20-0639432 Applied For Vevo beach Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Sland House Muhaname BRACKETT, MARK A Street Address (P.O. Box Number is Not Acceptable **1974 14TH AVENUE** VERO BEACH, FL 32960 BOX 1017 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 the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete ÞΝ ☐ Change Addition TITLE TITLE John Bocskau 4225 Apr. rayon woods circle Vero beach, FC 32967 BRACKETT, MARK A NAME NAME STREET ADDRESS P O BOX 1779 STREET ADDRESS VERO BEACH, FL 32961 CITY-ST-ZIP CITY-ST-ZIP Addition Delete ☐ Change TITLE TITLE Jason Keeler KISSNER, JACK NAME 1201 Abington Woods Will NAME 4132 ABINGTON WOODS CIRCLE STREET ADDRESS STREET ADDRESS vero beach, fr 32467 CITY-ST-ZIP VERO BEACH, FL 32967 City+ST-7IP Delete ☐ Change Addition TITLE TITLE Daniel Blum STEPAN, AXEL NAME 4228 Abination woods wrule NAME STREET ADDRESS STREET ADDRESS 215 OLD RIVER RD CITY-ST-ZIP vero Beach FU 32967 CITY-ST-ZIP LINCOLN, RI 02865 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 trostee 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 attact them an address, with an other time empowered.

**FILED** 

3-31-06