2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State
04-06-2007 90044 006 ****61.25

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1. Entity Name
ABINGTON WOODS PROPERTY OWNER'S ASSOCIATION, INC.

40052421

Principal Place of Business	Mailing Address
3885 20TH ST 202 VERO BEACH, FL 32960	POB 1617 VERO BEACH, FL 32961-1328 US

03292007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-0639432 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ISLAND HOUSE MGMT., LLC POB 1617 VERO BEACH, FL 32960	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LIVINGSTON, CHERRISE 4117 ABINGTON WOODS CIRCLE VERO BEACH, FL 32967	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Mike Greto 4219- Abington Woods Circle Vero Beach, FL 32967	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O RAULEN, PATTI 4117 ABINGTON WOODS CIRCLE VERO BEACH, FL 32967	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Sally Hubbard 4148 Abington Woods Circle Vero Beach, FL 32967	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O GRETO, MIKE 4219 ABINGTON WOODS CIRCLE VERO BEACH, FL 32967	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Patti Raulen 4117 Abington Woods Circle Vero Beach, FL 32967	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Sally E Hubbard 4/3/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #