

FILED
Jun 22, 2006 8:00 am
Secretary of State

05-16-2006 90023 001 ****61.25

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

DOCUMENT # N03971					
1. Entity Name KARANDA VILLAGE III CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O CASTLE GROUP 12270 SW 3RD ST FORT LAUDERDALE, FL 33325			Mailing Address C/O CASTLE GROUP P.O. BOX 559009 FORT LAUDERDALE, FL 33355-9009		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2436531	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHIR, GUY KAHAN & ASSOCIATES 1800 NW CORPORATE BLVD BOCA RATON, FL 33431			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when remitting) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing ☐		\$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 PD NAME SYKOFF, GERALD STREET ADDRESS 3961- E COCO PLUM CR CITY- ST- ZIP COCONUT CREEK, FL 33063	☐ Delete		TITLE D NAME .. STREET ADDRESS .. CITY- ST- ZIP ..	☒ Change ☐ Addition	
TITLE TD NAME DEMTY, SAMUEL STREET ADDRESS 3747-F COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☒ Delete		TITLE .. NAME .. STREET ADDRESS .. CITY- ST- ZIP ..	☒ Change ☐ Addition	
TITLE VD NAME TELESKA, MICHAEL STREET ADDRESS 3964 H COCOPLUM CIR. CITY- ST- ZIP POMPANO BEACH, FL 33063	☐ Delete		TITLE D NAME BYNUM, PAUL STREET ADDRESS 3951-A COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☐ Change ☒ Addition	
TITLE D NAME SIANO, FRANK STREET ADDRESS 3962 E COCOPLUM CIR. CITY- ST- ZIP POMPANO BEACH, FL 33063	☒ Delete		TITLE SD NAME LEBOWITZ, RAY STREET ADDRESS 3950-D COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☐ Change ☒ Addition	
TITLE D NAME PASQUALE, PETRILLO STREET ADDRESS 3987-G COCOPLUM CIRCLE CITY- ST- ZIP POMPANO BEACH, FL 33063	☒ Delete		TITLE D NAME .SONSKI, SONNY STREET ADDRESS 3953-A COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☐ Change ☒ Addition	
TITLE SD NAME SARNELL, MARION STREET ADDRESS 3953-C COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☒ Delete		TITLE D NAME CESTARO, PAT STREET ADDRESS 3899 COCOPLUM CIRCLE CITY- ST- ZIP COCONUT CREEK, FL 33063	☐ 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: <u>Gerald Sykoff</u>			Date: <u>6/16/06</u> <u>954.979.3182</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

66020416



04132008 Chg-NP CR2E037 (11/05)

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-2436531				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHIR, GUY KAHAN & ASSOCIATES 1800 NW CORPORATE BLVD BOCA RATON, FL 33431			7. Name and Address of New Registered Agent 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's signature required when resigning.)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	NEW DIRECTOR ☐ Delete SYKOFF, GERALD 3961- E COCO PLUM CR COCONUT CREEK, FL 33063		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition D	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ☐ Delete DEMTY, SAMUEL - PRESIDENT 3747-F COCOPLUM CIRCLE COCONUT CREEK, FL 33063		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition ..	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ☐ Delete TELESCA, MICHAEL 3964 H COCOPLUM CIR. POMPANO BEACH, FL 33063		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition D BYNUM, PAUL 3951-A COCOPLUM CIRCLE COCONUT CREEK, FL 33063	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	NEW DIRECTOR ☒ Delete SHANK, FRANK - Sonny Sonny 3962-E COCOPLUM CIR. POMPANO BEACH, FL 33063		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition SD LEBOWITZ, RAY 3950-D COCOPLUM CIRCLE COCONUT CREEK, FL 33063	
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SIGNATURE: <u>Samuel J. Demty</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

ATTACHMENT

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