

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000606

FILED
Apr 28, 2006
Secretary of State

Entity Name: LIME BAY MANAGEMENT GROUP, INC.

Current Principal Place of Business:

9190 LIME BAY BOULEVARD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

10034 WEST MCNAB ROAD
TAMARAC, FL 33321

New Mailing Address:

9190 LIME BAY BOULEVARD
TAMARAC, FL 33321

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PARKWAY
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GERALD, KAYE
Address: 9080 LIME BAY BLVD, #105
City-St-Zip: TAMARAC, FL 33321

Title: P () Delete
Name: RIOS, PETER
Address: 9150 LIME BAY BLVD. #207
City-St-Zip: TAMARAC, FL 33321

Title: TREA () Delete
Name: KATZ, MARTIN
Address: 9400 LIME BAY BLVD., #212
City-St-Zip: TAMARAC, FL 33321

Title: SEC () Delete
Name: MARKOW, FAY
Address: 9201 LIME BAY BLVD. #107
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ABRAMSON, GARY
Address: 9190 LIME BAY BOULEVARD
City-St-Zip: TAMARAC, FL 33321

Title: P (X) Change () Addition
Name: ROBERTS, JACQUELINE
Address: 9190 LIME BAY BOULEVARD
City-St-Zip: TAMARAC, FL 33321

Title: T (X) Change () Addition
Name: BEDOR, ANNETTE
Address: 9190 LIME BAY BOULEVARD
City-St-Zip: TAMARAC, FL 33321

Title: SEC (X) Change () Addition
Name: WILLIAMS, CHARLOTTE
Address: 9190 LIME BAY BOULEVARD
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY ABRAMSON

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date