

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90430 037 ****61.25

DOCUMENT # N04000000606 1. Entity Name LIME BAY MANAGEMENT GROUP, INC.					
Principal Place of Business 9190 LIME BAY BOULEVARD TAMARAC, FL 33321			Mailing Address 9190 LIME BAY BOULEVARD TAMARAC, FL 33321		
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		
04062007 Chg-NP CR2E037 (12/06)					
4. FEI Number APPLIED FOR				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent BROUGH, CHADROW & LEVINE, P.A. 1900 NORTH COMMERCE PARKWAY WESTON, FL 33326			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 _____ <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, 2007		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 NAME STREET ADDRESS CITY-ST-ZIP	VP ABRAMSON, GARY 9190 LIME BAY BOULEVARD TAMARAC, FL 33321	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Delores Gelosi 9081 Lime Bay Blvd., #208 Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBERTS, JACQUELINE 9190 LIME BAY BOULEVARD TAMARAC, FL 33321	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jacqueline Roberts 9301 Lime Bay Blvd., #101 Tamarac, FL 33321	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BEDOR, ANNETTE 9190 LIME BAY BOULEVARD TAMARAC, FL 33321	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Elizabeth Guttenberg 9151 Lime Bay Blvd., #211 Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC WILLIAMS, CHARLOTTE 9190 LIME BAY BOULEVARD TAMARAC, FL 33321	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Roslyn Bearman 9351 Lime Bay Blvd., #209 Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Harvey Schoen 9330 Lime Bay Blvd., #201 Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____ _____	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul Bauer 9070 Lime Bay Blvd., #204 Tamarac, FL 33321	<input type="checkbox"/> Change <input checked="" 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: <u>Delores Gelosi as Pres.</u> 4/20/07 554-722-5090 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

40090138

#N04000000606

LIME BAY MANAGEMENT GROUP, INC.
ADDITIONS TO OFFICERS AND DIRECTORS IN 10

D

Paul Bergemann
9080 Lime Bay Blvd., #102
Tamarac, FL 33321

D

Daniel Goldsmith
9100 Lime Bay Blvd., #309
Tamarac, FL 33321

D

Ruth Ariondo
9150 Lime Bay Blvd., #206
Tamarac, FL 33321

D

Hope Naupari
9201 Lime Bay Blvd., #212
Tamarac, FL 33321

D

Raul Caro
9300 Lime Bay Blvd., #112
Tamarac, FL 33321

D

Ilene Cohen
9400 Lime Bay Blvd., #207
Tamarac, FL 33321