

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 01, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # N04000006151

1. Entity Name

HOMEOWNERS' SUB-ASSOCIATION OF EAST LAKE  
VILLAGE, INC.



Principal Place of Business

600 W HILLSBORO BLVD SUITE 101  
DEERFIELD BEACH, FL 33441

Mailing Address

600 W HILLSBORO BLVD SUITE 101  
DEERFIELD BEACH, FL 33441



02222007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-1975663

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SMITH, SCOT F  
600 W HILLSBORO BLVD SUITE 101  
DEERFIELD BEACH, FL 33441

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IN THIS SPACE**

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

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME SMITH, SCOT F  
STREET ADDRESS 600 W HILLSBORO BLVD SUITE 101  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE VTD  
NAME HILLS, JAMES R  
STREET ADDRESS 600 W HILLSBORO BLVD SUITE 101  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE SD  
NAME EHRLICH, MICHAEL E  
STREET ADDRESS 600 W HILLSBORO BLVD SUITE 101  
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE  
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03/12/07-80033-010 70.00

**DO NOT WRITE  
IN THIS SPACE**

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: SCOT F SMITH  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/22/2007 (954) 426-9999  
Date Daytime Phone #