2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILLED DIVISION OF CORPORATIONS **DOCUMENT # N04000006676** 1. Entity Name MOORINGS AT LANTANA CONDOMINIUM NO. ONE 97 OCT 29 PM 12: 27 ASSOCIATION, INC. Principal Place of Business Mailing Address **802 W. WINDWARD WAY** 806 E. WINDWARD WAY LANTANA, FL 33462 SUITE 122 LANTANA, FL 33462 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 09182007 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 20-1412952 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ረው የተ GERSTLE, ROSEN & GOLDENBERG, P.A. Street Address (P.O. Box Number is Not Acceptable) 3835 N.W. BBOCA RATON BLVD. SUITE 100 BOCA RATON, FL 33431 <u>city</u> Ba 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 regist SIGNATURE DATE snd title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. **9**785 PRES TITLE ☐ Change TITI F Delete krouse, Kenneth TURNER, STEVE NAME NAME **リカンナマウ**/ 1.00 promping woll STREET ADDRESS 802 W. WINDWARD WAY PH 1 STREET ADDRESS CITY-ST-ZIP LANTANA, FL 33487 Lantana, FL. 334 lice Pres Treasurer CITY-ST-ZIP TREA Addition ☐ Change TITLE Delete TITLE WIENER, HILTON NAME all of Do NAME STREET ADDRESS 802 W. WINDWARD WAY STREET ADDRESS 7-MOORINGS DRIVE ANTANA FE 33462 CITY-ST-ZIP LANTANA, FL 33462 CITY-ST-ZIP Addition V/P Delete Secrezary ☐ Change TITLE TITLE Adam Rudzewski KROUSE, KENNETH NAME NAME 802.W. WINDWARD WAY # 201 --STREET ADDRECE FOCO-FERRIDANCO CO STREET ADDRESS CITY-ST-ZIP LANTANA, FL 33462 CITY-ST-ZIE TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME 300112030043 STREET ADDRESS STREET ADDRESS 11/06/07--01016--002 **61.25 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE_ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Сhange ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 empowerád. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR