2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2005 8:00 am Secretary of State

### Addition Process P	DOCUMENT # N0400007998 1. Entity Name STIRLING PLACE MERCHANT ASSOCIATION, INC.								01-20-	2005 9	0028 0	10 ****61	1.25
Suite, Apt. 4, etc.	7764 NW 44TH STREET 7764 NW 44TH STREET						-	40003691					
Suite, Apt. 4, etc.	2. Principal Pl	lace of Business	3. Mailine	n Address									
Tamarac, Florida Tamarac, Flo	•			, •				1 (86)(18) 811	EDILI DISLI DEL	ii AT III PA III	BAILE BRISI IN	418 IBII4 IBI41 IB	19421 B) (BB)
Country Coun			Suite	Suite, Apt. #, etc.					•			37 (10/03)	
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent	Tamarac, Florida		Tamar	Tamarac, Florida				4. FEI Numbe	"20 – 14	93737	7		
Name Janoura, Michael J.	33319			19				5. Certificate	of Status D	esired		\$8.75 Add Fee Require	ditional d
JANOURA, MICHAEL J 7764 NW 447H STREET SUNRISE, FL 33351 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 can familiar with, and accept the obligations of registered agent or frequenced agent. SIGNATURE Filing Fee is S61.25 Due by May 1, 2005 Since And Directors		6. Name and Address of Current	Registered	Agent		Name					gistered	Agent	
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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. Vice President Vi					į	Street Ad	ddress (1	P.P. Box Cumbe	r is Not Ac nercia	Tep BI	d.		
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. Vice President Vi	•					City	Tam	arac,	<u>.</u>		E1	Zip Cod	e
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DIE D JANOURA, MICHAEL J 7764 NW 44TH STREET SUNRISE, FL 33351 D EPSTEIN, ED 6859 STIRLING ROAD DAVIE, FL 33314 D LEVY, RITA S 6831 STIRLING ROAD DAVIE, FL 33314 D YODER, JACQUELINE S 6835 STIRLING ROAD DAVIE, FL 33314 D KAPLAN, BRYAN 6799 STIRLING ROAD DAVIE, FL 33314 D SABOTKA, AL 6795 STIRLING ROAD		9. Election Cam Trust Fund Co Delete Delete Delete Delete	Registeres paign F paign F 11. ITILE NAM STRE CITY TITLE TI	d Agent signature innancing innancing ion. E	D Jan 682	\$5.00 May B Added to Fees ADDITIONS/CHA	ANGES TO	Ma Flori OFFICEF J. 1 B1v	DATE ake chec da Depai	k payable to the three to f S RECTORS IN Change Change Change Change	tate 110 Addition Addition Addition Addition Addition

12. I nereby certify that the information supplied with this living does not quality for the exemption stated in Section 119.0/(3)(i), 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:

Mic hae/
Tangui

1/14/05 954-721-919