

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009150

FILED
May 02, 2006
Secretary of State

Entity Name: MONTAGE RESERVE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1601 FORUM PLACE, SUITE 805
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1601 FORUM PLACE, SUITE 805
ATTN: KEVIN VOLLER
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CSAPO, JOHN C
1601 FORUM PLACE, SUITE 805
W. PALM BCH, FL 33401 US

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: PD () Delete
Name: CSAPO, JOHN C
Address: 1601 FORUM PLACE, SUITE 805
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VSD () Delete
Name: VAIL, ROBERT
Address: 2160 NW RESERVE PARK TRACE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VDT () Delete
Name: TOMPSON, JOHN
Address: 2160 NW RESERVE PARK TRACE
City-St-Zip: PORT ST. LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL CLARKE

CFO

05/02/2006

Electronic Signature of Signing Officer or Director

Date