

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90109 028 ****61.25

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1. Entity Name
**EUROPEAN VILLAGE COMMERCIAL CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**1 PALM HARBOR PKWY.
PALM COAST, FL 32137**

Mailing Address
**1 PALM HARBOR PKWY.
PALM COAST, FL 32137**

50013823



2. Principal Place of Business
101 Palm Harbor Prkwy

3. Mailing Address
PO Box 352627

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04032006 Chg-NP CR2E037 (11/05)

City & State
Palm Coast, FL

City & State
Palm Coast, FL

4. FEI Number
20-1981038

Applied For
☐ Not Applicable

Zip Country
32137 USA

Zip Country
32137 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROEHR, CLAUD-PETER
1 PALM HARBOR PKWY.
PALM COAST, FL 32137**

7. Name and Address of New Registered Agent

Name
Bellapianta, Marc

Street Address (P.O. Box Number is Not Acceptable)

17 Old Kings Rd. N. Suite B

City **Palm Coast, FL** Zip Code **32137**

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]

MARC BELLAPIANTA *Property Manager*

4-12-06

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ROEHR, CLAUD-PETER ☒ Delete
STREET ADDRESS 1 PALM HARBOR PKWY.
CITY-ST-ZIP PALM COAST, FL 32137

TITLE VD
NAME KLAUS, ALFREDO ☒ Delete
STREET ADDRESS 1 PALM HARBOR PKWY.
CITY-ST-ZIP PALM COAST, FL 32137

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME Misztal, Jerry
STREET ADDRESS 13 Farraday Ln.
CITY-ST-ZIP Palm Coast, FL 32137

TITLE VD ☐ Change ☒ Addition
NAME Ferrena, Marcella
STREET ADDRESS 54 Colonial Ct.
CITY-ST-ZIP Palm Coast, FL 32137

TITLE STD ☐ Change ☒ Addition
NAME Winkle, William
STREET ADDRESS 101 Palm Harbor Pkwy. #135
CITY-ST-ZIP Palm Coast, FL 32137

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

[Signature] **JERRY MISZTAL**

4-12-06 (386) 445-9282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #