

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006756

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** PRINCETON STREET VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6518 N STATE RD 7  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

6518 N STATE RD 7  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 20-4317465

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, GARY V  
1230 NW 7 STREET  
MIAMI, FL 33125 US

**Name and Address of New Registered Agent:**

SHERMAN, LANCE V  
6518 N STATE ROAD 7  
COCONUT CREEK, FL 33073 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: LANCE SHERMAN

04/25/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SHERMAN, LANCE  
Address: 6518 N STATE RD 7  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD ( ) Delete  
Name: FITZSIMMONS, WILLIAM J  
Address: 6518 N STATE RD 7  
City-St-Zip: COCONUT CREEK, FL 33073

Title: SD ( ) Delete  
Name: SHERMAN, RITA  
Address: 6518 N STATE RD 7  
City-St-Zip: COCONUT CREEK, FL 33073

Title: TD ( ) Delete  
Name: FITZSIMONS, SUSAN  
Address: 6518 N STATE RD 7  
City-St-Zip: COCONUT CREEK, FL 33073

**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:

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: LANCE SHERMAN

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date