2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# N06000002402

Entity Name: N.E. 36TH STREET TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 50145
LIGHTHOUSE POINT, FL 33074

New Principal Place of Business:

2501-2503 NE 36TH STREET
LIGHTHOUSE POINT, FL 33064

Current Mailing Address:

PO BOX 50145
LIGHTHOUSE POINT, FL 33074

New Mailing Address:

FEI Number: 20-8393142 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FAULKNER, HOBART L
4131 NE 24TH AVE
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

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: FAULKNER, HOBART L
Address: PO BOX 50145
City-St-Zip: LIGHTHOUSE POINT, FL 33074

Title: VPD ( ) Delete
Name: KARYNUVEGES, B
Address: PO BOX 50145
City-St-Zip: LIGHTHOUSE POINT, FL 33074

Title: SD ( ) Delete
Name: FAULKNER, MARK
Address: PO BOX 50145
City-St-Zip: LIGHTHOUSE POINT, FL 33074

Title: TD (X) Delete
Name: FAULKNER, HOBART L
Address: PO BOX 50145
City-St-Zip: LIGHTHOUSE POINT, FL 33074

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: UVEGES, BERNADETTE K
Address: PO BOX 50145
City-St-Zip: LIGHTHOUSE POINT, FL 33074

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: H.L. FAULKNER P 02/07/2007

Electronic Signature of Signing Officer or Director — Date