

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90150 047 ****61.25

DOCUMENT # N09998

1. Entity Name
EL DORADO NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business
**11784 W SAMPLE RD
CORAL SPRINGS, FL 33065**

Mailing Address
**11784 W SAMPLE RD
CORAL SPRINGS, FL 33065**

50012178



2. Principal Place of Business

**21 SE 5th STREET
Suite, Apt. #, etc.
100**

3. Mailing Address

**21 SE 5th STREET
Suite, Apt. #, etc.
100**

03202006 Chg-NP CR2E037 (11/05)

City & State
BOCA RATON FL

City & State
BOCA RATON FL

4. FEI Number
59-2753660

Applied For
☐ Not Applicable

Zip
33432

Country
PAUM BEACH

Zip
33432

Country
PAUM BCH

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

6. Name and Address of Current Registered Agent

**UNITED COMMUNITY MGMT CORP
11784 W SAMPLE RD
CORAL SPRINGS, FL 33065**

7. Name and Address of New Registered Agent

Name **TERESA C. BISHOP**
Street Address (P.O. Box Number is Not Acceptable)
**21 SE 5th STREET
#100**
City **BOCA RATON** FL Zip Code **33432**

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

T. Bishop

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

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	SD P	<input type="checkbox"/> Delete
NAME	WERTHEIMER, STEPHEN	
STREET ADDRESS	22759 E DORADO DR	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	PD VP	<input type="checkbox"/> Delete
NAME	BERMAN, MEL	
STREET ADDRESS	22794 EL DORADO DR	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GRATZON, PETER	
STREET ADDRESS	22782 EL DORADO DR.	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	VD S	<input type="checkbox"/> Delete
NAME	WEIGENSBERG, MARILYN	
STREET ADDRESS	22725 EL DORADO DR.	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SHAPIRO, BERT	
STREET ADDRESS	22866 E. DORADO DR	
CITY-ST-ZIP	BOCA RATON, FL 33433	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHWESSLER, TOM	
STREET ADDRESS	22790 EL DORADO DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

T. Bishop 4/11/06