

JAN 20 2005 12:55PM

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90045 023 ****61.25

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N10528 1. Entity Name POINCIANA LAKES SOCIAL CLUB, INC.					
Principal Place of Business 3150 POINCIANA DRIVE LAKE WORTH, FL 33467			Mailing Address 3150 POINCIANA DRIVE LAKE WORTH, FL 33467		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FCI Number 59-2381859	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PMS CORP 3150 VIA POINCIANA LAKE WORTH, FL 33467			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			FL Zip Code		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2005		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 NAME STREET ADDRESS CITY-ST-ZIP	PD FERLAUTO, EILEEN 3154 VIA POINCIANA DRIVE LAKE WORTH, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEINPRESS, CHARLOTTE 3178 VIA POINCIANA LAKE WORTH, FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MINTZ, EDITH 3146 VIA POINCIANA DRIVE LAKE WORTH, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRANCOMANO, JEAN 3178 VIA POINCIANA LAKE WORTH, FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COHEN, LILLIAN 3186 VIA POINCIANA LAKE WORTH, FL 33467				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O WARREN, HELEN 3154 VIA POINCIANA LAKE WORTH, FL 33467				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Eileen Ferlauto</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

40017678



01202005 Chg-NP CR2E037 (10/03)

4. FCI Number
59-2381859

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

PMS CORP
 3150 VIA POINCIANA
 LAKE WORTH, FL 33467

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

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Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25
 Due by May 1, 2005**

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 NAME STREET ADDRESS CITY-ST-ZIP	PD FERLAUTO, EILEEN 3154 VIA POINCIANA DRIVE LAKE WORTH, FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEINPRESS, CHARLOTTE 3178 VIA POINCIANA LAKE WORTH, FL 33467	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MINTZ, EDITH 3146 VIA POINCIANA DRIVE LAKE WORTH, FL	☐ Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SIGNATURE: *Eileen Ferlauto*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *2/8/05* Daytime Phone: _____