2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 8:00 am Secretary of State

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1. Entity Name



TOWN VILLAS AT MOON LAKE HOMEOWNERS ASSOCIATION, INC. 40049700 Principal Place of Business Mailing Address 9251 FONTAINE PLACE 9251 FONTAINE PLACE BOCA RATON, FL 33442 US BOCA RATON, FL 33442 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04072006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Numbe Applied For 59-2652810 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CAMPBELL PROPERTY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 9251 FONTAINE PLACE BOCA RATON, FL 33496 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. П Due by May 1, 2006 Added to Fees Fiorida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PD Delete TITLE ☐ Change □ Addition PICKMAN, MILDRED NAME NAME 18999 STEWART CR 4 STREET ADDRESS STREET ADDRESS BOCA RATON, FL CITY-ST-ZIP CITY-ST-ZIP TITLE SD ☐ Delete TITLE ☐ Change Addition GERSON, ED NAME NAME STREET ADDRESS 19000 STEWART CIRCLE #6 STREET ADDRESS City-St-7/P BOCA RATON, FL 33496 CITY-ST-ZIP Delete TITLE Addition TITLE Director NAME RACCUGLIA, LOU 18760 GARBO TR 7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL CITY-ST-ZIP TD TITLE ☐ Delete TITLE Change ☐ Addition NAME WARSHAW, EVELYN NAME 907 TRACY COURT #2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL CITY-ST-7IP VPD Delete TITLE 18760 Garbo NAME PITCHMAN, JACK NAME 8711 GARBO TERR #3 STREET ADDRESS STREET ADDRESS Borg Ration, CITY-ST-ZIP BOCA RATON, FL CITY-ST-ZIP TITLE Delete TITLE Addition FISHELBERG, LARRY NAME NAME STREET ADDRESS 18760 GARBO TERR #8 STREET ADDRESS BOCA RATON, FL 33496 CITY-ST-ZIP 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

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