


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 03, 2005 8:00 am
Secretary of State

05-02-2005 90450 041 ****61.25

DOCUMENT # N15230					
1. Entity Name ASCOT PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business AKAM SOUTH INC 6421 CONGRESS AVE # 110 BOCA RATON, FL 33487			Mailing Address AKAM SOUTH INC 6421 CONGRESS AVE # 110 BOCA RATON, FL 33487		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
AKAM SOUTH INC 6421 CONGRESS AVE STE 110 BOCA RATON, FL 33487				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	
				Zip Code	
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 <i>Madys Galen</i> <small>Signature, typed or printed name of registered agent and see V applicable. (NOTE: Registered Agent signature required when registering)</small>					
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FETNER, LLOYD		NAME	ALLAN J. GLUCKSTEIN	
STREET ADDRESS	6421 CONGRESS AVE STE 110		STREET ADDRESS	5445 ASCOT BEND	
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP	BOCA RATON, FL	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISHBEIN, HERMAN		NAME	FISHBEIN, HERMAN	
STREET ADDRESS	6421 CONGRESS AVE STE 110		STREET ADDRESS	5455 ASCOT BEND	
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP	BOCA RATON, FL	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNLEZ, JACK		NAME	ARNOLD HURVITZ	
STREET ADDRESS	6421 CONGRESS AVE STE 110		STREET ADDRESS	5340 ASCOT BEND	
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP	BOCA RATON, FL	
TITLE	AST	<input checked="" type="checkbox"/> Delete	TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALPEN, LOUISE		NAME	ROBERT HELEY	
STREET ADDRESS	6421 CONGRESS AVE STE 110		STREET ADDRESS	5353 ASCOT BEND	
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-ST-ZIP	BOCA RATON, FL	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	MARTIN E HELSON	
STREET ADDRESS			STREET ADDRESS	5419 ASCOT BEND	
CITY-ST-ZIP			CITY-ST-ZIP	BOCA RATON, FL	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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>Madys Galen</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

66021215



04152005 Chg-NP CR2E037 (10/03)

4. FBI Number
59-2734199

Applied For
Not Applicable

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

FL

Zip Code

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

P ALLAN J. GLUCKSTEIN Change Addition
 5445 ASCOT BEND
 BOCA RATON, FL

V FISHBEIN, HERMAN Change Addition
 5455 ASCOT BEND
 BOCA RATON, FL

T ARNOLD HURVITZ Change Addition
 5340 ASCOT BEND
 BOCA RATON, FL

S ROBERT HELEY Change Addition
 5353 ASCOT BEND
 BOCA RATON, FL

D MARTIN E HELSON Change Addition
 5419 ASCOT BEND
 BOCA RATON, FL

Delete Change Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #