2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Apr 27, 2006 8:00 am Secretary of State DOCUMENT # N20390 04-27-2006 90221 007 ****61.25 LALIQUE MAINTENANCE ASSOCIATION, INC. Principal Place of Business Mailing Address **400 TONEY PENNA RD** C/O DICKINSON MGMT INC **400 TONEY PENNA RD** JUPITER, FL 33458 JUPITER, FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01112006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number 65-0091847 Applied For Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ATTORNEY GLAGET DICKENSON MANAGEMENT 400 TONEY PENNA RD JUPITER, FL 33458 Zip Code 401 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 **\$5.00** May Be Make check payable to Due by May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Change Addition MONASTRA, JIM 13110 LALIQUE CT THORN, DONALD NAME NAME STREET ADDRESS 2584 LALIQUE CIRCLE STREET ADDRESS PACM BEACHGARDENS FL.33410 PALM BCH GARDENS, FL 33410 CITY-ST-ZIP CITY-ST-ZIP Change Addition DRUMLEY, COLEMNA VIC VΡ Delete TITLE TITLE LANG, MARK NAME NAME 13175 LALIQUE CT STREET ADDRESS 2585 LALIQUE CIRCLE STREET ADDRESS PALM BEACH GOLDENS, 72. 33410 CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 City-St-7iP TITI F TITLE ☐ Delete ☐ Change Addition NEWMAN HERBERT 13/11 LALIQUE CT. U'SELLIS, RICHARD NAME 2596 LALIQUE CIRCLE STREET ADDRESS STREET ADDRESS PALM BONCH GARDOUS, FL. 33410 CITY-ST-ZIP PALM BEACH GARDENS, FL 33410 CITY-ST-ZIP TITLE TD **⊠** Delete Change TITLE ☐ Addition MONASTRA, JIM NAME STREET ADDRESS 13110 LALIQUE COURT STREET ADDRESS CITY-ST-ZIP PALM BCH GARDENS, FL 33410 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition GRAHAM, THEODORA NAME NAME 2632 LALIWUE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BCH GARDENS, FL 33410 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ 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 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.

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