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

## **FILED** Apr 21, 2006 8:00 am Secretary of State 04-21-2006 90103 048 \*\*\*\*61.25

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Principal Place of Business % PHOENIX MANAGEMENT 302 / Dis ROW 104 ROW 105 ROW	1. Entity Nam FAIRFIEL	Ne LD'S CEDAF	RBROOK ASSO	OCIATION, INC.										
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite   City & State   City & City & State   City & City & State   City & City & State   City & C	% PHOENIX MANAGEMENT % PHOENIX MANAGEMENT 3082 JOG ROAD 3082 JOG ROAD				JS		`,			AH DISIL DI	ii	RHTEL OL HOEN		
City & State  Country  Country  S. Certificates of Sea Desired  ROSENTHAL, DAVID C  Spendown Address of Current Registered Agent  ROSENTHAL, DAVID C  Spendown Address of Current Registered Agent  ROSENTHAL, DAVID C  Spendown Address of Current Registered Agent  ROSENTHAL, DAVID C  Spendown Address of New Registered Agent  ROSENTHAL, DAVID C  Spendown Address of New Registered Agent  ROSENTHAL, DAVID C  Spendown Address of New Registered Agent  ROSENTHAL, DAVID C  Spendown Address of New Registered Agent  ROSENTHAL, DAVID C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  Spendown Address of New Registered Agent  Rosenthal, David C  City FL  Zip Code  City FL  Zip Code  City FL  Zip Code  C  David Rosenthal, David C  David C  Rosenthal, David C  David C  Rosenthal, David C  David C  Rosenthal, Davi	Principal Place of Business     3. Mailing Addr			3. Mailing Address										
Country   Country   St. Certificate of Satus Desired   \$8.75 Additional	Suite, Apt. #, etc.			Suite, Apt. #, etc.			0	4072006	Chg-NP		CR2E03	37 (11/05)		
8. Certificate of Satus Desired   Foe Required   ROSENTHAL, DAVID C.  % PHOENIX MANAGEMENT, INC 3082 JOG RD.  LAKE WORTH, FL 33467    City   FL   Zip Code	City & State		City & State		4.	4. FEI Number 65-0018253				<del> </del>	<del></del>			
ROSENTHAL, DAVID C. % PHOENIX MANAGEMENT, INC 3082 JORG RD. LAKE WORTH, FL 33467  City FL Zip Code  Ci	-Zip	-Zip Country		Zip	ip Country		5.	5 Certificate of Status Decired 7 - \$8.75 Additional						
ROSENTHAL, DAVID C. % PHOENIX MANAGEMENT, INC 3082 JOG RD.  LAKE WORTH, FL 33467  City FL Zip Code  City FL Zip Code  6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objections of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agent, or both, in the State of Florids. I am familiar with, and accept the objection of registered agen		6. Name and	d Address of Current	Registered Agent			7.	Name and /	Address of	New Reg	istered /	Agent		
Eith cobigations of registered agent.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature   Sign	% PHOENIX MANAGEMENT, INC 3082 JOG RD.													
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam familiar with, and accept the obligations of registered agent.    Signatrun   Signatric   Signatr						City	<u> </u>					Zip Cod	le	
Filing Fee is \$61.25 Due by May 1, 2006  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TOURISM MERRIES, DENNIS  MERTES, DENNIS  6103 BEAR CREEK CT LAKE WORTH, FL 33467  CITY-SI-2P  TITLE  WAKE CITY-SI-2P  TITLE  VD VD VC VCRBLE, BILL 6179 BEAR CREEK CT LAKE WORTH, FL 33467  CITY-SI-2P  TITLE  NAME SIRRET ADDRESS CITY-SI-2P  TITLE NAME SIRR	the obligat	tions of registered		or the purpose of changir	ng its register	red office or	registered a	agent, or both	i, in the Stat	te of Florid		•		
Trust Fund Contribution. Addied to Fees   Florida Department of State    10. OFFICERS AND DIRECTORS   11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10    TITLE   PD			inted name of registered agen	t and title if applicable.	(NOTE: Register	ed Agent signet.	are required when	reinstating)			DATE		<del></del>	
TITLE NAME STREET ADDRESS CITY-ST-2P  TITLE NAME STREET ADDRESS CITY-ST-2P  TITLE NAME WORTH, FL 33467  TITLE NAME STREET ADDRESS CITY-ST-2P	1													
MERTES, DENNIS SIREET ADDRESS CITY-ST-2P TITLE NAME SIREET ADDRESS CITY-ST-2P	, .	_	1, 2006	Trust Fr										
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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	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD MERTES, DE 6103 BEAR (LAKE WORT STD KRIEDMAN, 9192 BEAR (LAKE WORT VD VERBLE, BIL 6179 BEAR (LAKE WORT)	7 1, 2008  OFFICERS AND DI ENNIS CREEK CT TH, FL 33467  WILLIAM CREEK GOURT H, FL 33467.  L CREEK CT	Trust Fi	und Contribu	LE ALDRESS Y-S1-ZIP LE ALE ALDRESS	ADD	ded to Fees	NGES TO C	Florid	a Depar	trinent of S  RECTORS IN Change Change Change Change	tate  i 10  Addition  Addition  Addition	

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: