2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State
04-26-2006 90197 044 ****70.00

DOCUMENT # N24994

1. Entity Name
SOUTH EAST FLORIDA APARTMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1650 S DIXIE HIGHWAY ~~5TH FLOOR~~ SUITE 500 BOCA RATON, FL 33432 US	1650 S DIXIE HIGHWAY 5TH FLOOR BOCA RATON, FL 33432 US

04102006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0036888 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KELLOUGH, JALANE L 1650 S DIXIE HIGHWAY ~~5TH FLOOR~~ SUITE 500 BOCA RATON, FL 33432	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 Jalane L. Kellough 4/17/06
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
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED KELLOUGH, JALANE L 1650 S DIXIE HIGHWAY 5TH FLOOR BOCA RATON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LEBLING, TOM 6400 N ANDREWS AVE FORT LAUDERDALE, FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD BURCKY, CRAIG 2000 W GLADES RD STE 206 BOCA RATON, FL 33231	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WALLACE, DAVE 3950 NW 31ST AVE MIAMI, FL 33142	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Ron Gunsam 1600 NW 150th St Miami, FL 33169	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RINCK, JOYCE 12008 SOUTH SHORE BLVD., SUITE 106 WEST PALM BEACH, FL 33414	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Kristina Porras 1680 Michigan 8th Floor Miami Beach, FL 33139	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ESFORMES, MARCYLENE 5300 POWERLINE RD, #207 FORT LAUDERDALE, FL 33309	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Jalane L. Kellough 4/17/06 561 447-0696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #