2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 28, 2006 8:00 am Secretary of State **DOCUMENT # N27325** 04-28-2006 90157 028 ****61.25 FISHERMAN'S WHARF PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business 40068623 Mailing Address 580 VILLAGE BLVD. 580 VILLAGE BLVD. SUITE 300 SUITE 300 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242006 Chg-NP CR2E037 (11/05) City & State 4. FEI Number City & State Applied For 65-0089012 Not Applicable Zip Zip Country 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 DENHOLTZ, STEWART F 580 VILLAGE BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 300 WEST PALM BEACH, FL 33409 City 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution, Due by May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 QVP. DVP THTLE Delete TITLE . ☐ Change Addition James Q Riordan, JR NAME DENHOLTZ, JACK 580 Village Blvd, Ste300 STREET ADDRESS 580 VILLAGE BLVD., SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33409 West Palm Beach, 33409 ☐ Delete TITLE TITLE ☐ Change ☐ Addition DENHOLTZ, STEWART NAME NAME STREET ADDRESS 580 VILLAGE BLVD., SUITE 300 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33409 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCNAMARA, COLLEEN J NAME NAME STREET ADDRESS STREET ADDRESS 580 VILLAGE BLVD., SUITE 300 CITY-ST-ZIP WEST PALM BEACH, FL 33409 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition RICH, ELLEN NAME NAME STREET ADDRESS 580 VILLAGE BLVD STE 300 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33409 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition Marz D. Hopin HOUSER, KATHY NAME NAME 580 Willage Blvd, Ste 300 STREET ADDRESS STREET ADDRESS 580 VILLAGE BOULEVARD, SUITE 300 CITY-ST-ZIP WEST PALM BEACH, FL 33409 CITY-ST-ZIP West Palm Beach, 17, 33409 TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.

FILED