

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27998

FILED
Apr 30, 2006
Secretary of State

Entity Name: DURR'S HOMEOWNER ASSOCIATION INC.

Current Principal Place of Business:

713 NW 19TH AVE
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

713 NW 19TH AVE
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARTIN, GALE
713 NW 19TH AVE
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: DYKES, ESSIE,
Address: 812 NW 19TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL

Title: P () Delete
Name: HINTON, EARL WALTER,
Address: 713 NW 19TH AVE
City-St-Zip: FT. LAUDERDALE, FL

Title: SD () Delete
Name: ESSIE, THOMAS,
Address: 1721 N.W. 7TH PL.
City-St-Zip: FT. LAUDERDALE, FL

Title: DS () Delete
Name: WATTS, TERRI
Address: 729 NW 19TH TERR
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ESSIE, THOMAS,
Address: 1721 N.W. 7TH PL.
City-St-Zip: FT. LAUDERDALE, FL

Title: T (X) Change () Addition
Name: WATTS, TERRI
Address: 729 NW 19TH TERR
City-St-Zip: FT LAUDERDALE, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WLATER EARL HINTON

P

04/30/2006

Electronic Signature of Signing Officer or Director

Date