
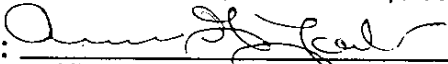


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90033 046 ****61.25

DOCUMENT # N28251					
1. Entity Name GLADES EAST HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 5995 BANNOCK TERR BOYNTON BCH, FL 33437			Mailing Address 5995 BANNOCK TERR BOYNTON BCH, FL 33437		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02052008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 65-0105680	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CRYSTAL COMMUNITY MANAGEMENT, INC. C/O EDWARD O'CONNELL 5995 BANNOCK TERR BOYNTON BEACH, FL 33437			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee Is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	VD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREENBERG, SONIA		NAME	Less, Gerald	
STREET ADDRESS	6136 TERRA MERE CIRCLE		STREET ADDRESS	6153 Terra Mere Circle	
CITY-ST-ZIP	BOYNTON BEACH, FL		CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBS, JANYCE		NAME	Wurman, Marjorie	
STREET ADDRESS	6160 TERRA MERE CIR		STREET ADDRESS	6159 Terra Mere Circle	
CITY-ST-ZIP	BOYNTON BEACH, FL		CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHAFFER, ANDOR		NAME	Sinai, Christina	
STREET ADDRESS	6148 TERRA MERE CIRCLE		STREET ADDRESS	6057 Terra Mere Circle	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437		CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	D	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAUB, ANDREW		NAME	Taub, Andrew	
STREET ADDRESS	6046 TERRA MERE CIR		STREET ADDRESS	6046 Terra Mere Circle	
CITY-ST-ZIP	BOYNTON BCH, FL		CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	DS	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KORNBLUM, GERALD		NAME	Orsino, John	
STREET ADDRESS	6094 TERRA MERE CIR		STREET ADDRESS	6141 Terra Mere Circle	
CITY-ST-ZIP	BOYNTON BEACH, FL 33437		CITY-ST-ZIP	Boynton Beach, FL 33437	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEDIK, DANIEL		NAME		
STREET ADDRESS	6165 TERRA MERE CIR		STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH, FL		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.					
SIGNATURE: 			3-18-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		