

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29054

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** NEW PROVIDENCE MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

1117 S.W. 149 LANE  
SUNRISE, FL 33326 US

**New Principal Place of Business:**

1167 SW 149 LANE  
SUNRISE, FL 33326 US

**Current Mailing Address:**

P.O. BOX 266342  
WESTON, FL 33326 US

**New Mailing Address:**

**FEI Number:** 65-0130177      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEVENS, JOHN W ESQ  
2 SOUTH UNIVERSITY DRIVE  
PLANTATION, FL 33324 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: P  
Name: CYMAN, PAUL  
Address: 1167 S. W. 149 LANE  
City-St-Zip: SUNRISE, FL 33326

Title: VP  
Name: RIVERA, DONALD  
Address: 15001 SW 9TH STREET  
City-St-Zip: SUNRISE, FL 33326

Title: T  
Name: BOND, WARREN S  
Address: 1154 SW 149TH TERR  
City-St-Zip: SUNRISE, FL 33326 US

Title: S  
Name: ARON, CHRISTINE  
Address: 954 SW 149 LANE  
City-St-Zip: SUNRISE, FL 33326

I hereby 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 all other like empowered.

SIGNATURE: WARREN S BOND

T

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date