

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90240 039 \*\*\*\*61.25

**DOCUMENT # N29491**

1. Entity Name  
**SONATA AT MISSION BAY ASSOCIATION, INC.**



Principal Place of Business  
**POINTE MANAGEMENT GROUP  
75 NE 6TH AVE. SUITE 206  
DELRAY BEACH, FL 33483 US**

Mailing Address  
**POINTE MANAGEMENT GROUP  
75 NE 6TH AVE. SUITE 206  
DELRAY BEACH, FL 33483 US**



01042006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**58-1377091**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**ESTEBANEZ, ERIC  
75 NE 6TH AVE  
206  
DELRAY BEACH, FL 33483**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**V  
DELINOR, BENOIT  
10993 RAVEL CT  
BOCA RATON, FL 33498**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**P  
KAHN, JAMES  
10840 HAYDN DRIVE  
BOCA RATON, FL 33498**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
BELKNAP, JOHN  
20323 MONTEVERDI CIRCLE  
BOCA RATON, FL 33498**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**T  
ONTANO, RAUL  
20317 MONTEVERDI CIRCLE  
BOCA RATON, FL 33498**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
TWAITE, JAMES  
10871 HAYDN DRIVE  
BOCA RATON, FL 33498**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
GUILLOTE, MIKE  
20311 MONTEVERDI CIR  
BOCA RATON, FL 33498**

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/17/06 561-477-6364