


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90029 024 ****61.25

DOCUMENT # N31528

1. Entity Name
ESPERANTE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**222 LAKEVIEW AVE
 WEST PALM BEACH FL 33401**

Mailing Address
**BARRY & COMPANY, P.A.
 1400 CENTREPARK BLVD., STE. 850
 WEST PALM BEACH FL 33401
 US**



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
Barry & Company
 Suite, Apt. #, etc.
222 Lakeview Ave #1630
 City & State
WPB FL
 Zip
33401

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent
**BARRY, STEPHEN G
 1400 CENTREPARK BLVD.
 SUITE 850
 WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent
 Name *Barry Company*
 Street Address (P.O. Box Number is Not Acceptable)
222 Lakeview Ave
#1630
 City *WPB* FL Zip Code *33401*

4. FEI Number **65-0236107** Applied For Not Applicable

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

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 *Stephen G Barry*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	BARRY, STEPHEN G	
STREET ADDRESS	222 LAKEVIEW AVE, PH 1	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	PSD	<input checked="" type="checkbox"/> Delete
NAME	LA MANNA, DR. MARGARET	
STREET ADDRESS	222 LAKEVIEW AVE, PH 3,4	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MORRISON, CARLOS	
STREET ADDRESS	222 LAKEVIEW AVE, PH 5,6	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	ASD	<input type="checkbox"/> Delete
NAME	LITTLETON, ALBERT M	
STREET ADDRESS	222 LAKEVIEW AVE, PH 7	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>D Francisco Gil Rodriguez</i>	
STREET ADDRESS	<i>222 Lakeview Ave, PH 2</i>	
CITY-ST-ZIP	<i>West Palm Beach FL 33401</i>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Stephen G Barry*