

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

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90118 033 ****61.25

DOCUMENT # N32410

1. Entity Name

THE AVIARY HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

100 RIVERBRIDGE BLVD.
WEST PALM BEACH FL 33413

Mailing Address

1928 LAKEWORTH ROAD
LAKE WORTH FL 33461



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

Zip

Country

Zip

Country

4. FEI Number

65-0319750

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVENUE SOUTH, SUITE 400
WEST PALM BEACH FL 33409

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME CASTLEMAN, BERNIE
STREET ADDRESS 181 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33413

TITLE VP ☒ Change ☐ Addition
NAME LAPORTE, RONALD
STREET ADDRESS 182 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE VD ☒ Delete
NAME SHATTIE, DAVID
STREET ADDRESS 114 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33413

TITLE D ☐ Change ☒ Addition
NAME MOSHER, JANET
STREET ADDRESS 144 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE SD ☐ Delete
NAME SPATARA, JAMES
STREET ADDRESS 167 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33413

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME BRONSWEIG, RONALD
STREET ADDRESS 119 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33413

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME LAPORTE, RONALD
STREET ADDRESS 182 HARBOR LAKE CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL 33413

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: *Bernard M. Castleman* **BERNARD M. CASTLEMAN** 2/15/06