
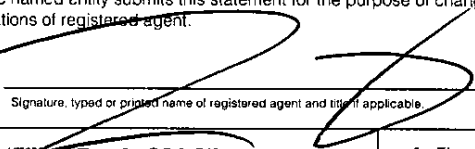
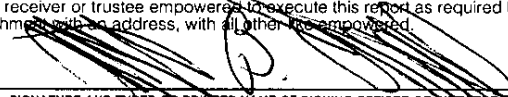


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90095 001 ***306.25

DOCUMENT # N35080					
1. Entity Name DEVON NEIGHBORHOOD ASSOCIATION, INC.					
Principal Place of Business C/O CASTLE GROUP 12270 SW 3RD STREET PLANTATION, FL 33325 US			Mailing Address C/O CASTLE GROUP PO BOX 559009 FORT LAUDERDALE, FL 33355 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0166088	
				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	
STERN, MYRON 7298 S. DEVON DRIVE TAMARAC, FL 33321				Name KATZMAN & KORB, P.A.	
				Street Address (P.O. Box Number is Not Acceptable) 1501 NW 49TH STREET	
				City FORT LAUDERDALE	
				State FL	
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.				Zip Code 33309	
SIGNATURE  LEIGH C. KATZMAN, ESQ.				DATE 04-17-08	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
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					
TITLE	PD	<input checked="" type="checkbox"/> Delete		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
NAME	STERN, MYRON			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	7298 S DEVON DR				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	TD	<input type="checkbox"/> Delete		PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SPECTOR, ARTHUR				
STREET ADDRESS	7441 N. DEVON DR.				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	SD	<input type="checkbox"/> Delete		STD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WALD, LILLIAN				
STREET ADDRESS	7376 N. DEVON DR.				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	D	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BERLINER, ARTHUR				
STREET ADDRESS	7365 N. DEVON DR.				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	2VP	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVIN, IRA				
STREET ADDRESS	7398 N DEVON DRIVE				
CITY-ST-ZIP	TAMARAC, FL 33321				
TITLE	1VP	<input type="checkbox"/> Delete		2VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEVITON, BERT				
STREET ADDRESS	7376 N. DEVON DR.				
CITY-ST-ZIP	TAMARAC, FL 33321				
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 persons empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				4/9/08 Date	
				954.722.0849 Daytime Phone #	

66007577



02132008 Chg-NP CR2E037 (12/06)

ATTACHMENT

DEVON NEIGHBORHOOD ASSOCIATION, INC.
DOCUMENT NUMBER N35080

66007577

ADDITIONAL DIRECTORS

- #5 WEINOWITZ, HENRY
7273 S. DEVON DR
TAMARAC, FL 33321
- #6 ROSENBERG, RENE
7140 S. DEVON DR
TAMARAC, FL 33321
- #7 HORN, RONALD
7278 S. DEVON DR
TAMARAC, FL 33321
- #8 KAPLAN, ROBERTA
7444 N. DEVON DR
TAMARAC, FL 33321
- #9 BRESSACK, IRWIN
7176 S. DEVON DR
TAMARAC, FL 33321
- #10 KAPLAN, MARTIN
7259 S. DEVON DR
TAMARAC, FL 33321