


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90061 031 \*\*\*\*61.25

<b>DOCUMENT # N35596</b>	
1. Entity Name SWEETWATER COURTS CONDOMINIUM NO. 5 ASSOCIATION, INC.	

Principal Place of Business 10930 LAKEMORE LANE <del>702</del> #103 BOCA RATON, FL 33498	Mailing Address % SCHREIBER 10930 LAKEMORE LANE, APT. 101 BOCA RATON, FL 33498
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40017294



01162007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0251755	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BONORA, MARILYN 10930 LAKEMORE LANE SUITE 103 BOCA RATON, FL 33498
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**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 re-registering) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

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	PD BONORA, MARILYN 10930 LAKEMORE LN #103 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHREIBER, LEO 10930 LAKEMORE LANE, #101 BOCA RATON, FL 33498
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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:** Marilyn A. Bonora 2/1/07 561-477-5079  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**MARILYN BONORA**  
**PRESIDENT**