2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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1	ANNUAL REPORT	Г
DOCUME	ENT # N36541	(S.)

1. Entity Name

DEVÓN CONDOMINIUM D ASSOCIATION, INC. Principal Place of Business Mailing Address C/O CASTLE GROUP C/O CASTLE GROUP 50020702 12270 SW 3RD ST PO BOX 559009 PLANTATION, FL 33355-9009 US PLANTATION, FL 33325 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04152006 Chg-NP CR2E037 (11/05) 4. FEI Number 65-0237776 Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CASTLE MANAGEMENT, INC. 12270 SW 3RD STREET Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33325 City 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 reinstating) Make check payable to \$5.00 May Be Filing Fee is \$61.25 9. Election Campaign Financing Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 PD TITI F ☐ Delete TITI F ☐ Change ☐ Addition WEINOWITZ, HENRY NAME NAME STREET ADDRESS 7273 S. DEVON DR STREET ADDRESS TAMARAC, FL CITY-ST-ZIP CITY-ST-ZIP TITLE VD Delete TITLE ☐ Change ■ Addition BELDENGREEN, EDYTHE NAME NAME STREET ADDRESS 7303 S DEVON DR STREET ADDRESS CITY-ST-ZIP TAMARAC, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SANDHAUS, PHYLLIS NAME NAME STREET ADDRESS **7325 S. DEVON DR** STREET ADDRESS CITY-ST-ZIP TAMARAC, FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SMITH, DORIS NAME NAME 7333 S DEVON DR STREET ADDRESS STREET ADDRESS TAMARAC, FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME SCHULMAN, ROSALYN NAME STREET ADDRESS 7327 S. DEVON DR. STREET ADDRESS TAMARAC, FL 33321 CITY-ST-78P CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

HENRY WEINOWITZ,

954-726-3233