

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39481

FILED  
May 01, 2006  
Secretary of State

**Entity Name:** ACREAGE BUILDERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1128 ROYAL PALM BEACH BLVD  
PMB 105  
ROYAL PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

1128 ROYAL PALM BEACH BLVD  
PMB 105  
ROYAL PALM BEACH, FL 33411

**New Mailing Address:**

**FEI Number:** 65-0425203      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MUNZ, MIKE  
132 SW. CASSINE CT  
PALM CITY, FL 34990      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP      ( ) Delete  
Name: GERALD, ADAMS  
Address: 6142 ROYAL PALM BEACH BLVD.  
City-St-Zip: WEST PALM BEACH, FL 33412

Title: PD      ( ) Delete  
Name: TANEN, HARRY  
Address: 13695 CALLINGTON DR  
City-St-Zip: WELLINGTON, FL 33414

Title: TSD      ( ) Delete  
Name: MUNZ, MIKE  
Address: 132 SW. CASSINE CT.  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE MUNZ

TSD

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date