

**-2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90390 024 \*\*\*\*61.25



**DOCUMENT # N43073**  
 1. Entity Name  
**HUNTERS RUN - COUNCIL OF THE PRESIDENTS, INC.**

Principal Place of Business  
**3700 CLUBHOUSE LANE**  
**BOYNTON BEACH, FL 33436**

Mailing Address  
**3700 CLUBHOUSE LN**  
**BOYNTON BEACH, FL 33436 US**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

03212006 Chg-NP CR2E037 (11/05)

City & State  
 Zip Country

4. FEI Number  
**65-0261594**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**LEVINE, JAY S**  
**2500 N. MILITARY TR**  
**STE 275**  
**BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent  
 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 reinstating) DATE

**Filing 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RAPPOPORT, HOWARD 3700 CLUBHOUSE LN BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEWMAN, ALVIN 3700 CLUBHOUSE LN BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SOLOMAN, LEONARD 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAPLAN, ARMAND 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HORNSTEIN, MARILYN 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an other like empowered.

SIGNATURE: *Alvin Newman* **A/24/06** **561-734-3000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #