*2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 26, 2007 8:00 am Secretary of State DOCUMENT # N49951 03-26-2007 90056 025 ****61.25 1. Entity Name ABERDEEN LAKES DRIVE ASSOCIATION, INC. Principal Place of Business Mailing Address 951 BROKEN SOUND PARKWAY 951 BROKEN SOUND PARKWAY 40040854 SUITE 250 SUITE 250 **BOYNTON BEACH, FL 33487** BOYNTON BEACH, FL 33487 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01032007 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 65-0355391 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COMMUNITY ASSOCIATION SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 951 BROKEN SOUND PARKWAY SUITE 250 BOYNTON BEACH, FL 33487 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. SIĞNATURE . 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 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TTR.E ■ Addition Change NAME MASSE TOTO HORDINGTOR. 735Z NO CHA PORT DE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 C11Y-S1-ZIP Delete TITLE TITLE Change ☐ Addition MORGANSTEIN, STANLEY NAME NAME 7721 ROCKFORD ROAD STREET ADDRESS STREET ADORESS CITY-ST-ZIP **BOYNTON BEACH, FL 33437** CITY-ST-7P NAdEL 5/4 Delete Change Addition BRITTANDE DOR. NAME STREET ADDRESS STREET ADDRESS CIT-SI-2P BOYNTON BEACH, FL-33437 CITY-ST-ZIP **VPD** TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS 7881 SHOAL CREEK LANE STREET ADDRESS BOYNTON BEACH, FL 33437 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CON-ST-ZP 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: _

FILED

Stanley MORGANSTEIN

ATTACHMENT,

#N4995

Aberdeen Lakes Board of Directors March 21, 2007

| NAME | ADDRESS |
|----------------------------|---|
| Stanley Morganstein, Pres. | c/o CAS 951 Broken Sound Pkwy, #250, Boca Raton, FL 33483 |
| Sid Nadel, Secretary | c/o CAS 951 Broken Sound Pkwy, #250, Boca Raton, FL 33483 |
| Harvey Kart Director | c/o CAS 951 Broken Sound Pkwy, #250, Boca Raton, FL 33483 |
| Phil Bibicoff Vice Pres. | c/o CAS 951 Broken Sound Pkwy, #250, Boca Raton, FL 33483 |
| Roberta H. Pilnick Tres. | c/o CAS 951 Broken Sound Pkwy, #250, Boca Raton, FL 33483 |