2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 09, 2005 8:00 am DOCUMENT # N9300003756 Secretary of State 1. Entity Name 05-09-2005 90294 009 ****70.00 VINTAGE OAKS PROPERTY OWNERS' ASSOCIATION. INC. Principal Place of Business Mailing Address 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 C/O LANG MANAGEMENT COMPANY 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 50050903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 65-0583690 Not Applicable Zip Zip Country 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 MANAGE MENT CO. CAPLAN, LOUIS ESQ Street Address (P.O. Box Number is Not Acceptable) 21045 COMMERCIAL 301 YAMATO RD, SUITE 4150 **BOCA RATON FL 33431** Zip Code 33 486 BOCA RATON 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 FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to 9. Election Campaign Financing Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition BARRY, STANLEY NAME NAME 5935 WINTAGE OAKS CIR. STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33484 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition RABINOWITZ, MAYNARD 5845 VINTAGE OAKS CT. STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33484** CITY-ST-7IP CITY-ST-7IP ☐ Delete Change TiTLE TITLE Addition STEIN, LIBBY NAME NAME 5959 VINTAGE OAKS CIR. STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33484 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition DAVIS, HOWARD NAME NAME 5819 VINTAGE OAKS CIR. STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33484** CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition MARKOWITZ, STUART NAME NAME 5799 VINTAGE OAKS CIR. STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33484 CITY-ST-ZIP CITY-ST-ZIP Addition TATLE ☐ Delete TITLE ☐ Change NOVACK, MARTIN NAME NAME STREET ADDRESS 116 355 VINTAGE OAK CIRCLE STREET ADDRESS PELCRAY BEACH, FL 33484 CITY-ST-ZIP CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

FILED

Daytime Phone #