2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
02-02-2006 90040 001 ****61.25

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1. Entity Name
SPRING VALLEY PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORP. PKWY SUNRISE, FL 33323 US	C/O MIAMI MANAGEMENT, INC. 1145 SAWGRASS CORP. PKWY SUNRISE, FL 33323 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0467076 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GLENN, RICHARD W FOUR HARVARD CIRCLE SUITE 600 WEST PALM BEACH, FL 33409	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FALLON, RICHARD 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FALCON, RICHARD ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BOWERS, DEBRA 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FERNANDEZ, MARIA 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Richard - please sign where indicated. I have made appropriate changes.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DANIELS, YVONNE 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KLEIN, HARRIS 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ESCOTO, JERRY 1145 SAWGRASS CORPORATE PKWY SUNRISE, FL 33323	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions co... indicated on this report or supplemental report is true and accurate and that my signature shall ha... of the corporation or the receiver or trustee empowered to execute this report as required by Chap... 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: Richard Falcon