

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90070 040 \*\*\*\*61.25

**DOCUMENT # N94000000242**

1. Entity Name  
EGRET NEST HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business  
PHOENIX MANAGEMENT  
3082 JOG ROAD  
LAKE WORTH, FL 33467

Mailing Address  
3082 JOG ROAD  
LAKE WORTH, FL 33467

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052007 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-0503674

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

ROSENTHAL, DAVID  
% PHOENIX MANAGEMENT SERVICES  
3082 JOG ROAD  
LAKE WORTH, FL 33467

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, 2007**

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 PD ☐ Delete  
NAME TAUSSIG, SID  
STREET ADDRESS 2556 EGRET LAKE DR.  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE D ☐ Change ☒ Addition  
NAME ELBRICH, JOSEPH  
STREET ADDRESS 2534 EGRET LAKE DRIVE  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE D ☒ Delete  
NAME ATLAS, JUDY  
STREET ADDRESS 2509 EGRET LAKE DRIVE  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE D ☐ Change ☒ Addition  
NAME BILMORE, FRANCES  
STREET ADDRESS 2511 EGRET LAKE DRIVE  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE SD ☐ Delete  
NAME LANDI, JOANNE  
STREET ADDRESS 2517 EGRET LAKE DR.  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE G ☐ Change ☒ Addition  
NAME GUNSHER, MADELINE  
STREET ADDRESS 2506 EGRET LAKE DRIVE  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE D ☐ Delete  
NAME BRYDA, BRUCE  
STREET ADDRESS 2563 EGRET LAKE DR  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE VPD ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☒ Delete  
NAME ALBERS, HARRIET  
STREET ADDRESS 2515 EGRET LAKE DRIVE  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD ☐ Delete  
NAME BRENNER, NEIL  
STREET ADDRESS 2505 EGRET LAKE DR.  
CITY-ST-ZIP WEST PALM BEACH, FL 33413

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:**

*Neil Brenner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/30/2007 5616490109*

Date

Daytime Phone #