2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N9400000336

1. Entity Name



FILED Apr 14, 2006 8:00 am Secretary of State 04-14-2006 90141 019 ****61.25

		ASSOCIATION, INC						
Principal Place of Business C/O PRIME MANAGEMENT 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487		Mailing Address C/O PRIME MANAGEMENT 6300 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487			- v			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04062006 C	ng-NP C	R2E037 (11/05)	
City & State		City & State			4. FEI Number 65-046759	6		pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of St	atus Desired	\$8.75 Add	
	6. Name and Address of Current R	egistered Agent			7. Name and Add	ress of New Regis	stered Agent	
SOBOTEC			Name					
SOBOTRO, PHILIP 5674 ROYAL LAKE CIRCLE BOYNTON BEACH, FL 33437			Street Address		O. Box Number is I	Not Acceptable)	•	
- +,			ļ					
			City				FL Zip Cod	ie
	named entity submits this statement for	the purpose of changing its re	egistered office or	registere	ed agent, or both, in	the State of Florida	. I am familiar with,	and accept
the obligat	ions of registered agent.							
SIGNATURE								
SIGNATIONE	Signature, typed or printed name of registered agent an	o title if applicable. (NOTE:	Registered Agent signati	ure required (when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.					
	_	1			\$5.00 May Be Added to Fees		check payable t Department of S	
10.	_	Trust Funa Co		<u>.</u>		Florida	Department of S	tate
TITLE NAME STREET ADDRESS	Due by May 1, 2006 OFFICERS AND DIRE PD SOBOTKO, PHILIP 5674 ROYAL LAKE CIRCLE	Trust Funa Co	ontribution.	<u> А</u>	Added to Fees DDITIONS/CHANG	Florida ES TO OFFICERS /	Department of S	tate
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I nereby certify that the information supplied with this illing does not qualify for the exemptions contained in Chapter 119, Florica Statutes. If further certify that the information indicated on this report or suppliemental 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: