

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 03, 2006 8:00 am
Secretary of State

DOCUMENT # N94000001484

1. Entity Name,

AVALON POINTE HOMEOWNER'S ASSOCIATION, INC.



04-03-2006 90405 048 ****61.25

Principal Place of Business

2295 CORPORATE BLVD. NW
SUITE 138
BOCA RATON FL 33431
US

Mailing Address

2295 CORPORATE BLVD. NW
SUITE 138
BOCA RATON FL 33431
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

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

HAAG, DAVID
2295 NW CORPORATE BLVD.
#138
BOCA RATON FL 33431

Name

PRIME MANAGEMENT GROUP

Street Address (P.O. Box Number is Not Acceptable)

6300 PARK OF COMMERCE BLVD

City

BOCA RATON

FL

Zip Code

33487

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

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

TITLE SD
NAME FOGEL, NORMA
STREET ADDRESS 4025 AVALON POINTE DR
CITY-ST-ZIP BOCA RATON FL 33496 ☐ Delete

TITLE TD
NAME GRANDIS, STANLEY
STREET ADDRESS 4045 NW 64TH ROAD
CITY-ST-ZIP BOCA RATON FL 33496 ☐ Delete

TITLE D
NAME FARBER, RICHARD
STREET ADDRESS 4024 AVALON POINTE DR
CITY-ST-ZIP BOCA RATON FL 33496 ☐ Delete

TITLE PD
NAME HARRIS, FRED
STREET ADDRESS 4005 AVALON POINTE DRIVE
CITY-ST-ZIP BOCA RATON FL 33496 ☒ Delete

TITLE VPD
NAME DUBERMAN, FERN
STREET ADDRESS 4004 AVALON POINTE DRIVE
CITY-ST-ZIP BOCA RATON FL 33496 ☐ Delete

TITLE ~~TREASURER~~
NAME ~~ROBERT GRUGSTEIN~~
STREET ADDRESS ~~6358 AVALON POINTE CT~~
CITY-ST-ZIP ~~BOCA RATON FL 33496~~ ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

TREASURER
NAME ROBERT GRUGSTEIN
STREET ADDRESS 6358 AVALON POINTE CT
CITY-ST-ZIP BOCA RATON FL 33496 ☒ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/26/06