

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90198 042 ****61.25

DOCUMENT # N94000001579

1. Entity Name
**STERLING LAKES ESTATES AT ABERDEEN
ASSOCIATION, INC.**



Principal Place of Business
**8694 INDIAN RIVER RUN
BOYNTON BEACH, FL 33437 US**

Mailing Address
**8694 INDIAN RIVER RUN
BOYNTON BEACH, FL 33437 US**

40003100



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01292007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0539636

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**ASSOCIATION MANAGEMENT GROUP
8694 INDIAN RIVER RUN
BOYNTON BEACH, FL 33437**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
GOLDROSEN, SELMA
8229 ROTHBURY LN.
BOYNTON BEACH, FL 33437 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/D
Goldrosen Selma
8229 Rothbury Ln.
Boynton Beach FL 33437 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MILLER, DONALD
7639 NORTHPORT DR.
BOYNTON BEACH, FL 33437 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
Bernard Waxenbaum
1514 Northport Drive
Boynton Beach, FL 33437 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BIBICOFF, PHIL
7532 NORTHPORT DR
BOYNTON BEACH, FL 33437 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
PILNICK, ROBERTA
7628 NORTHPORT DR
BOYNTON BEACH, FL 33437 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/D
Howard Isaacs
7547 Northport Drive
Boynton Beach, FL 33437 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
HYMAN, LEE
7610 NORTHPORT DR
BOYNTON BEACH, FL 33437 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HYMAN, LEE
7610 NORTHPORT DRIVE
BOYNTON BEACH FL 33437 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/13/07 (561) 237-1966