

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90058 038 ****61.25

DOCUMENT # N94000003026	
1. Entity Name EMERALD SPRINGS HOMES OF DAVIE HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 11011 SHERIDAN ST. #208 COOPER CITY, FL 33026	Mailing Address 11011 SHERIDAN ST. #208 COOPER CITY, FL 33026
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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40040300



03082007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2824864	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent EISINGER, DENNIS J ESQ. 4000 HOLLYWOOD BLVD #265S HOLLYWOOD, FL 33021	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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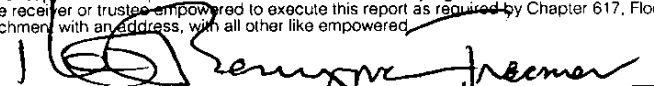
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE _____
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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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TSIKIS, EUGENE 2400 SW 131 TER. DAVIE, FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Tarallo, Kathryn 2153 SW 132 way DAVIE, FL 33325 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MCKENZIE, SUSAN 2320 SW 131 TER. DAVIE, FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Moses, Thomas 2353 SW 132 way DAVIE, FL 33325 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS BLEWS, KATHLEEN 13101 SW 21 PL. DAVIE, FL 33325 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Mayer, Paul 2402 SW 132 way DAVIE, FL 33325 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT BERRYMAN, PAUL 2311 SW 131 TER. DAVIE, FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP ANCONA, KAREN 2191 SW 131 TER. DAVIE, FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BENJAMIN, JAMES 2401 SW 131 TER. DAVIE, FL 33325 ☐ 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: 	3/26/07	954-765-7307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #