

Aberdeen Parcel "O"

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90299 038 ****61.25

DOCUMENT # N95000004479					
1. Entity Name ABERDEEN PARCEL "O" HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business C/O CASTLE MANAGEMENT 5850 W. ATLANTIC AVE., STE. 106 DELRAY BEACH, FL 33484			Mailing Address C/O CASTLE MANAGEMENT 5850 W. ATLANTIC AVE., STE. 106 DELRAY BEACH, FL 33484		
2. Principal Place of Business		3. Mailing Address		50051154 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03082005 Chg-NP CR2E037 (10/03)	
City & State		City & State		4. FEI Number 65-0696747	
Zip		Country		Applied For Not Applicable	
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	
KRIVOK, JAMES N 1818 AUSTRALIAN AVE SOUTH #400 WEST PALM BEACH, FL 33409				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, 2005		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	VPD SICKERMAN, MORT 6207 LONG EY LANE BOYNTON BEACH, FL 33437 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ARONOFF, HOWARD 6276 LONG KEY LANE BOYNTON BEACH, FL 33437 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCHUMER, JUNE 6235 LONGKEY BOYNTON BEACH, FL 33437 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GROSSMAN, LAWRENCE 6359 LONG KEY LANE BOYNTON BEACH, FL 33437 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LOVIT, DAVID 6255 LONG KEY LANE BOYNTON BEACH, FL 33437 ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GREENSPAN, RICHARD 6183 LONG KEY LANE BOYNTON BEACH, FL 33437 ☐ 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 exemption stated in Section 119.07(3)(i), 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: <u>DAVID LOVIT</u> <u>5/1/05</u> <u>5613644926</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					