2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007
Secretary of State

DOCUMENT# N96000000373

Entity Name: PONCE DE LEON MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

13650 COLUMBINE AVE
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

13650 COLUMBINE AVE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NELSON, MICHAEL H
13650 COLUMBINE AVE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BAUMEL, ERIC
Address: 11300 OKEECHOBEE BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D/V ( ) Delete
Name: RAMIRIZ, TONY
Address: 11369 OKEECHOBEE BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33409

Title: TD ( ) Delete
Name: PANGAS, PAMELA
Address: 110 PONCE DELEON .
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: SD ( ) Delete
Name: CONROY, KELLY
Address: 11337 OKEECHOBEE BLVD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: CAVANAUGH, BOB
Address: 756 PINE CHASE
City-St-Zip: WELLINGTON, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC BAUMEL PD 07/05/2007
Electronic Signature of Signing Officer or Director — Date