## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## **FILED** DOCUMENT # N96000002920 Jan 24, 2007 08:00 A 1. Entity Namo **Secretary of State** DECO SQUARE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 9072 HARDING AVENUE SURFSIDE FL 33154 \_ 9072 HARDING AVENUE SURFSIDE FL 33154 2. Principal Place of Businoss - No P.O. Box # 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, ctc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 65-0683848 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo DEBORAH, COVE Street Address (P.O. Box Number Is Not Acceptable) 9074 HARDING AVENUE SURFSIDEFL FL 33754 City 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 or registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. IIILE PSD Defete 11111 ☐ Change ☐ Addition U00000601703 NAM FUHRMAN, HERBERT ALE FAE 01/26/07-80061-006 61.25 SHELL ADDRESS STREET LADDRESS 9072 HARDING AVENUE CITY SI-7/P rary-st-ae SURFSIDE FL ☐ Defete DHE Change Addilion 🔲 HILE NAM NAME FUHRMAN, MARTHA SERVET ADDRESS STREET ADDRESS 9072 HARDING AVENUE CITY ST 78P CATY-ST 78 SURFSIDE FL HILL ☐ Delete IIIII☐ Change Addition NAME NAME WOGINIAN, ERNESTO STITEL LADIENT SO SIGILL ADDRESS 9072 HARDING AVENUE CHY SI-ZP CHY-SE ZIP SURFSIDE FL ☐ Change ☐ Addition IIII ☐ Delete mile NAME NAM SHALLADDRESS SIREET ADDRESS PITY SI ZIF GHY SI-70 ☐ Change 11111 ☐ Delete IIIU ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CHY ST ZIP TITLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 eath, 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.

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CITY ST-7IP

HERBERT FUHKMAN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT