2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 26, 2006 8:00 am Secretary of State DOCUMENT # N97000000117 1. Entity Name 04-26-2006 90184 003 ****70.00 L'AQUILA PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 21045 COMMERCIAL TRAIL BOCA RATON FL 33486 21045 COMMERCIAL TRAIL **BOCA RATON FL 33486** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 65-0794307 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIAM K. ISAACSON Street Address (P.O. Box Number is Not Acceptable) 21045 COMMERCIAL TRAIL **BOCA RATON FL 33486** 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 frome of registered agent and title il applicable (NOTE: Registered Agent signature (squired when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. SD TITLE TITLE ☐ Delete ☐ Change ☐ Addition ETTINGER, PHILLIP NAME NAME 7919 L'AQUILA WAY STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33446 CITY-ST-ZIF CITY-ST-ZIP TD ☐ Delete TITLE TITLE Change ☐ Addition KABAT, DONALD NAME 7911 L'AQUILA WAY STREET ADDRESS STREET AUDRESS DELRAY BEACH FL 33446 CITY-ST-ZIP CITY-ST-ZIP VD. $\overline{Q}\mathcal{G}$ Delete TITLE TITLE Addition NAME SPEIGEL, SAM NAME 7823 L'AQUILA WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL 33446 CITY-ST-ZIP **D**clete TITLE PD-TITLE ☐ Change ☐ Addition LIEBERMAN, RICHARD, STREET ADDRESS 7832 L'AQUILA WAY STREET ADDRESS CITY-ST-ZIP DELRAY BEACH FL 33446 CITY-ST-7IP TITLE ☐ Defete TITLE ☐ Change Addition LEVINE, GLORIA NAME NAME 7920 L'AQUILA WAY STREET ADDRESS STREET ADDRESS **DELRAY BEACH FL 33446** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Hyron Skeel TISZ Lagurlaway 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 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.

CITY-ST-ZIP

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SIGNATURE:

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