

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

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FILED
May 01, 2006 8:00 am
Secretary of State

04-13-2006 90288 034 ****70.00

DOCUMENT # N97000005347 1. Entity Name LARKSPUR LANDING AT IBIS, INC.					
Principal Place of Business 300 AVENUE OF CHAMPIONS SUITE 120 PALM BEACH GARDENS FL 33418			Mailing Address 300 AVENUE OF CHAMPIONS SUITE 120 PALM BEACH GARDENS FL 33418		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0915871 <div style="float: right; border: 1px solid black; padding: 2px;"> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent QUEEN, SUSAN 300 AVENUE OF CHAMPIONS SUITE 120 PALM BEACH GARDENS FL 33418			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small> <div style="float: right;"><small>DATE:</small></div>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		\$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	PD FINKELSTEIN, CHARLES 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Garvin 300 Ave of champions PBG, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SENDEL, BETSY 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director/Secretary Harval Taub 300 Ave of champions PBG, FL 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FLOWERS, VEREEN 300 AVENUE OF CHAMPIONS PALM BEACH GARDENS FL 33418	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TAVO, MORTEN 300 AVE OF CHAMPIONS PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 1 sec. TAUB, HARVEY Y PALM BEACH GARDENS FL 33418	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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.					
SIGNATURE: <u>MORTEN TAVO</u> <u>3/23/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="float: right;"> <small>Date</small> </div>					