

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90362 007 ****61.25

DOCUMENT # N98000003948

1. Entity Name
**THE VILLAGES OF SAN SIMEON MAINTENANCE
ASSOCIATION, INC.**



Principal Place of Business
**C/O CASTLE MANAGEMENT, INC.
12270 SW 3RD STREET
PLANTATION, FL 33325**

Mailing Address
**C/O CASTLE MANAGEMENT, INC.
12270 SW 3RD STREET
PLANTATION, FL 33325**

40050470



2. Principal Place of Business
11784 W. Sample Rd

3. Mailing Address
11784 W. Sample Rd

03152006 Chg-NP CR2E037 (11/05)

City & State
Coral Springs FL
Zip
33065
Country
Browd

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Coral Springs FL
Zip
33065
Country
Browd

4. FEI Number
65-0906479
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROSEN & EICHNER
WESTON CORPORATE CTR.
2500 WESTON RD #220
WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name
United Community Management
Street Address (P.O. Box Number is Not Acceptable)
11784 West Sample Rd
City
Coral Springs FL FL Zip Code
33065

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 **Denise Kattawee, U.P. Finance United Comm. Mgmt.** 3/29/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GLAZER, RON 3951 SAN SIMEON LANE WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DABREO, MONIQUE 3736 SAN SIMEON LANE WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARBASH, MICHAEL 3738 SAN SIMEON LANE WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATRIZI, JIMMY 3744 SAN SIMEON LANE WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAMPBELL, AMY 3741 SAN SIMEON CIR. WESTON, FL 33331	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: **Amy Campbell**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/06
Date

Daytime Phone #