

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 AUG 21 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000004853	
1. Entity Name PALMA VISTA AT PONTE VERDE HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business INTEGRITY PROPERTY MNGT PO BOX 8726 CORAL SPRINGS, FL 33075-8726	Mailing Address INTEGRITY PROPERTY MNGT PO BOX 8726 CORAL SPRINGS, FL 33075-8726
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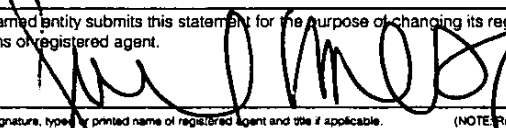
2. Principal Place of Business 451 Broken Sand Pkwy Suite, Apt. #, etc. Suite 250 City & State Boca Raton, FL Zip 33487 Country US	3. Mailing Address 451 Broken Sand Pkwy Suite, Apt. #, etc. 250 City & State Boca Raton, FL Zip 33487 Country US
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07312006 Chg-NP CR2E037 (4/06)

6. Name and Address of Current Registered Agent INTEGRITY PROPERTY MNGT, INC. 953 N UNIVERSITY DRIVE C/O CYNTHIA WHITTLE CORAL SPRINGS, FL 33071	
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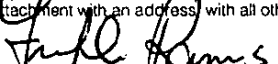
7. Name and Address of New Registered Agent Name: Community Association Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 451 Broken Sand Pkwy #250 City: Boca Raton FL Zip Code: 33487	
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8. The above named entity submits this statement 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, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE 8/8/06

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELISHA, GEORGETTE 9850 PALMA VISTA WAY BOCA RATON, FL 33428 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUDSON, SCOTT 2105 BELLA VISTA CIR BOCA RATON, FL 33428 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GROMANN, THERESA 21069 BELLA VISTA CIR BOCA RATON, FL 33428 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, JOSE 9832 PALMA VISTA WAY BOCA RATON, FL 33428 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAMOS, FRANKIN 21003 BELLA VISTA CIR BOCA RATON, FL 33428 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Franklin Ramos 21063 Bella Vista Cir Boca Raton, FL 33428 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Scott Hudson 21050 Bella Vista Circle Boca Raton, FL 33428 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S maxine Shasha 9808 Palma Vista Way Boca Raton, FL 33428 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Laine Fortado 21180 La Vista Circle Boca Raton, FL 33428 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Adriana Deutsch 21179 Ponte Vista Circle Boca Raton, FL 33428 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 600079128966 08/25/06--01033--004 **61.25

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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 8/8/06 Daytime Phone #

7C 8/33