


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90172 016 ****61.25

DOCUMENT # N98000005125 1. Entity Name SOUTHAMPTON CONDOMINIUM E ASSOCIATION, INC.					
Principal Place of Business 10034 W MCNAB ROAD TAMARAC, FL 33321			Mailing Address 10034 W MCNAB ROAD TAMARAC, FL 33321		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent MILES JAMES R CONSOLIDATED COMMUNITY MANAGEMENT 10034 W MCNAB ROAD TAMARAC, FL 33321				7. Name and Address of New Registered Agent Name <u>Katzman + Korr PA</u> Street Address (P.O. Box Number is Not Acceptable) <u>1501 NW 49 St.</u> Suite <u>202</u> City <u>Ft. Lauderdale</u> FL <u>33309</u>	
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> SIGNATURE <u>[Signature]</u> <small>Signature, typed or printed name of registered agent and title if applicable</small> </div> <div style="width: 30%;"> <u>LEIGH C. KATZMAN, ESQ.</u> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 30%;"> <u>3-21-07</u> <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2007		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	TD DONSKY, ELLIS 10034 W MCNAB ROAD TAMARAC, FL 33321 <u>954-726-9673</u>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SATTY SHELDON 10034 W MCNAB Rd. TAMARAC, FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RACUSEN, RUTH 10034 W MCNAB ROAD FORT LAUDERDALE, FL 33321	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DR LOUIS SPERLINT 10034 W. MCNAB RD TAMARAC FL 33321	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD SHAPIRO, ALBERT 10034 W MCNAB ROAD FORT LAUDERDALE, FL 33321	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GONZALEZ, GEORGE 10034 W MCNAB RD. TAMARAC, FL 33321	<input checked="" type="checkbox"/> Delete	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"/> Delete		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"/> Delete		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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>Ellis Donsky, Tres.</u> <small>Date</small>		
4/7/07			954-71 9673 <small>Daytime Phone #</small>		