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

FILED
Apr 05, 2006 8:00 am
Secretary of State
04-05-2006 90155 004 ****70.00

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1. Entity Name

MONTECITO PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
21045 COMMERCIAL TRAIL BOCA RATON FL 33486	21045 COMMERCIAL TRAIL 9 BOCA RATON FL 33486 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E037 (10/05)

4. FEI Number 65-0925170 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ISACCSON, WILLIAM K LANG MANAGEMENT COMPANY INC. 21045 COMMERCIAL TRAIL BOCA RATON FL 33486	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 name of registered agent and title if applicable (NOTE Registered Agent signature required when resigning) DATE

FILE NOW: 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	CANTER, ARTHUR		NAME		
STREET ADDRESS	7813 MONTECITO PLACE		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		CITY-ST-ZIP		
TITLE	D	☑ Delete	TITLE	☐ Change	☐ Addition
NAME	DIAMENT, MADELINE		NAME		
STREET ADDRESS	7781 MONTCELO PL		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		CITY-ST-ZIP		
TITLE	TD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	GOLDBAUM, ARTHUR		NAME		
STREET ADDRESS	7869 MONTECITO PLACE		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		CITY-ST-ZIP		
TITLE	SD	☑ Delete	TITLE	☐ Change	☑ Addition
NAME	GOODMAN, HARVEY		NAME	Secretary. Bob Klein	
STREET ADDRESS	7757 MONTECITO PLACE		STREET ADDRESS	7716 Montecito Place	
CITY-ST-ZIP	DELRAY BEACH FL 33446		CITY-ST-ZIP	Delray Beach, FL 33446	
TITLE	D	☐ Delete	TITLE	☑ Change	☐ Addition
NAME	COHEN, JOEL		NAME	VICE PRESIDENT	
STREET ADDRESS	7829 MONTECITO PLACE		STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33446		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☑ Addition
NAME			NAME	DIRECTOR Dr. Reese James	
STREET ADDRESS			STREET ADDRESS	7916 Montecito Place	
CITY-ST-ZIP			CITY-ST-ZIP	Delray Beach, FL 33446	

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: _____ 3-27-06