## 2006 NOT-FOR-PROPIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # N99000002635

1. Entity Name



**FILED** Apr 05, 2006 8:00 am Secretary of State

04-05-2006 90155 036 \*\*\*\*61.25

NORTHWOOD GA INC.	RDENS NEIGHI	BORHOOD ASSOC	CIATION,			
Principal Place of Business		Mailing Address	Mailing Address			
424 41ST STREET WEST PALM BEACH FL 33407			424 41ST STREET WEST PALM BEACH FL 33407			
2. Principal Place of Business		3. Mailing Addres	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		1st MOORE CR2E03	7 (10/05)
City & State		City & State	City & State		4. FEI Number 65-1017032	Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
				Name		
CRAMER, JOHN 424 41ST ST WEST PALM BEACH FL 33407			Street Address (P.O. Box Number is Not Acceptable)			
	á			City	Fl	Zip Code
The above named entity the obligations of regist		ent for the purpose of char	nging its registe	red office or register	red agent, or both, in the State of Florida. I am	familiar with, and accept
SIGNATURE Signature, typed	or printed name of registered		(NOTE Register	red Agent signature required	t when reinstating) DATE	

		: FEE		
Du	е Ву	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

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete TITLE TITLE VP Change Addition CRAMER, JOHN NAME NAME STREET ADDRESS 424 41ST STREET STREET ADDRESS  $\rightarrow$ WEST PALM BEACH FL 33407 CITY-ST-ZIP CITY-ST-ZIP Delete ★ Addition TITLE Darroll Nagin COLEMAN, DORIS E NAME NAME PO FILL (424 41st Street) 407 43RD ST STREET ADDRESS STREET ADDRESS West Polm Bruch XI 33407 WEST PALM BEACH FL 33407 CITY-ST-ZIP CITY-ST-ZIP TITLE VP Detete Viven Brenahan Addition TITLE ANDERSON, M.C. NAME NAME to bush hst STREET ADDRESS 422 44TH ST STREET ADDRESS West Pulm Beauli &1 33407 WEST PALM BEACH FL 33403 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITLE TITLE ■ Addition RICHTER, COLLEEN NAME NAME STREET ADDRESS STREET ADDRESS 508 45TH ST CITY-ST-ZIP WEST PALM BEACH FL 33407 CITY-ST-ZIP Ken Ruszenas **Addition** TITLE ☐ Delete TITLE Change ROSZENAS, JACKIE NAME NAME 42 ONEY FOR 407 43RD ST STREET ADDRESS STREET ADDRESS Most Polm Beach 41 33407 CITY-ST-ZIP WEST PALM BEACH FL 33407 CITY-ST-ZIP ★ Change Delete TITLE Addition MULLEN, MIKE NAME NAME 523 40TH STREET STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-7IP 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 is if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

201 863 1334