

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90312 039 ****61.25

DOCUMENT # N99000003914					
1. Entity Name THE VINEYARDS AT PALM BEACH HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 322 N.E. 3RD ST. BOYNTON BEACH, FL 33435			Mailing Address 322 N.E. 3RD ST. BOYNTON BEACH, FL 33435		
2. Principal Place of Business <i>314 NE 3rd Street</i>		3. Mailing Address <i>314 NE 3rd Street</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02172005 Chg-NP CR2E037 (10/03)	
City & State <i>Boynton Beach, FL</i>		City & State <i>Boynton Beach, FL</i>		4. FEI Number 65-0919628	
Zip <i>33435</i>		Country		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ST. JOHN, CORE, & LEMME, PA 1601 FORUM PLACE WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent		
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 reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE P NAME BURKE, ANTHONY STREET ADDRESS 4110 PLUMBAGO PLACE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
TITLE V NAME KOTZAMANIS, ANGELO STREET ADDRESS 6868 SEA DAISY DRIVE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
TITLE T NAME THADDIES, CASSANDRA STREET ADDRESS 4034 ARTHURIUM AVE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
TITLE S NAME GENTILE, FRANK STREET ADDRESS 4085 PLUMBAGO PLACE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
TITLE D NAME KENDALL, BRIAN STREET ADDRESS 4039 ARTHURIUM AVE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
TITLE D NAME VENSKI, BOB STREET ADDRESS 4047 COANTICE CT. CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>3-29-05</i> Daytime Phone #	