


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90819 029 \*\*\*\*61.25

<b>DOCUMENT # N99000005709</b>	
1. Entity Name <b>SHOMA HOMES AT NAUTICA SINGLE FAMILY TOWNHOMES NEIGHBORHOOD ASSOCIATION, INC.</b>	

Principal Place of Business <b>3691 SW 164 AVENUE MIRAMAR, FL 33027</b>	Mailing Address <b>C/O MIAMI MANAGEMENT, INC. 3691 SW 164 AVENUE MIRAMAR, FL 33027</b>
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**40092146**



2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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03302007 Chg-NP CR2E037 (12/06)

City & State	City & State
Zip	Country

4. FEI Number <b>65-0072622</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>BAKALAR &amp; EICHNER, PA 150 SOUTH PINE ISLAND RD STE 540 FORT LAUDERDALE, FL 33324</b>	
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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, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
D GARBIN, GLADYS 3691 SW 164TH AVE MIRAMAR, FL 33027	
D GONZALEZ, JULIE 3691 SW 164TH AVE MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
PD KIRKLAND, LESLIE 3691 SW 164TH AVE MIRAMAR, FL 33027	<input type="checkbox"/> Delete
S LARA, PATRICIC 3421 SW 170TH AVE MIRAMAR, FL 33027	<input type="checkbox"/> Delete
T DMCLAUGHIN, KIM 3691 SW 164TH AVE MIRAMAR, FL 33027	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Director. Jose Rubio 3906 SW 171 Terrace Miramar, FL 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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: Jose J. Rubio Jose J. Rubio 4/10/2007  
Signature and typed or printed name of signing officer or director Date Daytime Phone #