

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

2008 MAY 29 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04142008 Chg-NP CR2E037 (12/06)

DOCUMENT # N99000006292					
1. Entity Name VIZCAYA NEIGHBORHOOD PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 6401 CONGRESS AVE. SUITE 140 BOCA RATON, FL 33487-3531			Mailing Address 6401 CONGRESS AVE. SUITE 140 BOCA RATON, FL 33487-3531		
2. Principal Place of Business - No P.O. Box # 1200 S. Rogers Cr		3. Mailing Address 1200 S. Rogers Cr			
Suite, Apt. #, etc. Ste 3		Suite, Apt. #, etc. Ste 3			
City & State Boca Raton FL		City & State Boca Raton FL			
Zip 33487		Country		Zip 33487	
Country		4. FEI Number 65-0841334			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent LIPPMAN, STEVE 6401 CONGRESS AVE. #140 SUITE 250 BOCA RATON, FL 33487			7. Name and Address of New Registered Agent Name: Karen Lippman Street Address (P.O. Box Number is Not Acceptable): 1200 S. Rogers Circle #3 City: Boca Raton FL Zip Code 33487		
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: <u>Karen Lippman</u> 4/15/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <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	T KALISH, STANLEY 7161 CATLONA CIR DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Klausner, Carol 15797 Vivanco Street Delray Beach, FL 33446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHULBAUM, ROBERT 15474 FORENZA CIR. DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV AARONSON, STEVE 15458 FORENZA CIRCLE DELRAY BEACH, FL 33446	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	200130439462 05/29/08--01029--017 **122.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZEITLIN, MIKE 7112 CATALUNA CIRCLE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ZEE, BARBARA 7028 CATALUNA CIRCLE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRANT, LESLIE 7237 CATAUNA CIRCLE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERRANT, LESLIE 7237 CATAUNA CIRCLE DELRAY BEACH, FL 33446	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<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>Michael Zeitlin</u> 4/15/08 361-638-6330 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					