

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 12, 2004 8:00 am**  
**Secretary of State**

03-12-2004 90027 027 \*\*\*158.75

**DOCUMENT # P03000019400**

1. Entity Name

**POINT MANALAPAN IMPROVEMENTS ASSOCIATION, INC.**



Principal Place of Business

**40 AUDUBON CAUSEWAY  
MANALAPAN FL 33462**

Mailing Address

**40 AUDUBON CAUSEWAY  
MANALAPAN FL 33462**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**90-0068624**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**



MOORE

CR2E034 (11/03)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TAMMARO, MICHAEL S  
113 PEGASUS DR  
JUPITER FL 33477**

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete  
NAME **COHEN, ALVIN**  
STREET ADDRESS **1430 LANDS END ROAD**  
CITY-ST-ZIP **LANTANA FL 33462-4768**

TITLE **PRESIDENT** ☐ Change ☒ Addition  
NAME **ABRAHAM BERNSTEIN**  
STREET ADDRESS **61 CURLEW RD**  
CITY-ST-ZIP **MANALAPAN, FL 33462**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition  
NAME **DESMOND KEOGH**  
STREET ADDRESS **20 Audubon Cswy**  
CITY-ST-ZIP **MANALAPAN FL 33462**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VICE PRESIDENT** ☐ Change ☒ Addition  
NAME **Tom Thonant**  
STREET ADDRESS **55 CURLEW RD**  
CITY-ST-ZIP **MANALAPAN FL 33462**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **SECRETARY/TREASURER** ☐ Change ☒ Addition  
NAME **WILLIAM BERNSTEIN**  
STREET ADDRESS **40 Audubon Cswy**  
CITY-ST-ZIP **MANALAPAN, FL 33462**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 607, 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:

*William Bernstein*

**WILLIAM BERNSTEIN 3/4/04 561-585-3646**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #