2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State
04-08-2005 90051 015 ***150.00

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1. Entity Name
THE MANORS APARTMENTS, INC.

Principal Place of Business	Mailing Address
965 MANOR DRIVE #6A PALM SPRINGS, FL 33461	11576 PIERSON RD K8 WELLINGTON, FL 33414 US

03282005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	965 MANOR DRIVE Suite, Apt. #, etc. STE 6
City & State	City & State PALM SPRINGS, FL
Zip / Country	Zip 33461 / Country

4. FEI Number 65-0681836 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROSEN, PAUL 11576 PIERSON RD K8 WEST PALM BEACH, FL 33414	Name Street Address (P.O. Box Number is Not Acceptable) 965 MANOR DRIVE, STE 6 City PALM SPRINGS FL Zip Code 33461

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 Paul Rosen PAUL ROSEN 3-28-05
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, 2005 Fee will be $550.00

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROSEN, PAUL 11576 PIERSON RD K8 WELINGTON, FL 33414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 965 MANOR DRIVE, STE 6 PALM SPRINGS, FL 33461
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ROSEN, HARRY 2500 WESTON RD SUITE 220 WESTON, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 200 EAST BROWARD BLVD, 17 FLOOR FORT LAUDERDALE, FL 33301
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST ROSEN, RON 4000 HOLLYWOOD CIR #7825 SO. HOLLYWOOD, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Paul Rosen PAUL ROSEN 3-28-05 561-790-7453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #