

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 14, 2009
Secretary of State**

DOCUMENT# 726266

Entity Name: GEORGETOWN ASSOCIATION, INC.

Current Principal Place of Business:

1630 EMBASSY DRIVE
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

3307 NORTHLAKE BLVD
SUITE 107
PALM BEACH GARDENS, FL 33403 US

New Mailing Address:

COMPLETE PROPERTY MANAGEMENT
3307 NORTHLAKE BLVD., SUITE 107
PALM BEACH GARDENS, FL 33403 US

FEI Number: 59-1594996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH F CROSSEN C/O COMPLETE PROPERTY MGT
3307 NORTHLAKE BLVD
SUITE 107
PALM BEACH GARDENS, FL 33403 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: LUETJE, CONNIE
Address: 1630 EMBASSY DR, UNIT 205
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DS () Delete
Name: BAILEY, CAROLYN
Address: 1630 EMBASSY DR UNIT 310
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T () Delete
Name: LUEFJE, CONCELIA
Address: 1630 EMBASSY DRIVE #205
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DP () Delete
Name: BROWN, LYNN
Address: 1630 EMBASSY DR UNIT 309
City-St-Zip: WEST PALM BEACHE, FL 33401

Title: D () Delete
Name: DONEGAN, EDWARD
Address: 1630 EMBASSY DR #307
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: SCHOPPMANN, ANNA
Address: 1630 EMBASSY DRIVE #202
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: GUELFAND, ALCIRA
Address: 1630 EMBASSY DRIVE # 210
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN BROWN

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date