2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750189

FILED Jan 29, 2009 Secretary of State

Entity Name: ABBEY PARK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1849 ABBEY ROAD, #14A WEST PALM BEACH, FL 33415 **Current Mailing Address: New Mailing Address:** 4000 S 57TH AVE LAKE WORTH, FL 33463 FEI Number: 65-0316298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DICKER, EDWARD C/O DICKER, KRIVOK & STOLOFF 1818 AUSTRALIAN AVENUE SOUTH, STE 400 WEST PALM BEACH, FL 33409 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HANNA, SARA Name: Name: Address: 1883 ABBEY RD Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SINOT, WAYNE Name: Address: 1849 ABBEY ROAD 14A Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: () Delete Title: (X) Change () Addition POPOVICH, ALTHEA MCELWEE, WILLIAM Name: Name: 1887 ABBEY PARK Address: 1899 ABBET PARK Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: (X) Delete Title: () Change () Addition MCELWEE, WILLIAM Name: Name: Address: 1887 ABBEY ROAD 23A Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip:

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: WAYNE SINOT ST 01/29/2009