

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000961

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** CITYPLACE TOWNHOUSE POA, INC.

**Current Principal Place of Business:**

225 SOUTHERN BLVD.  
SUITE 202  
WEST PALM BEACH, FL 33405

**New Principal Place of Business:**

**Current Mailing Address:**

225 SOUTHERN BLVD.  
SUITE 202  
WEST PALM BEACH, FL 33405

**New Mailing Address:**

**FEI Number:** 90-0029061      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SALATA, KATHLEEN  
225 SOUTHERN BLVD  
STE 202  
WEST PALM BEACH, FL 33405 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: D  
Name: KATAJISTO, ARVO  
Address: 659 HIBISCUS STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: P  
Name: CURTIN, KENNETH  
Address: 646 FERN ST  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T  
Name: BERRY, JOYCE  
Address: 580 SAPODILLA AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D  
Name: MEYERS, MICHELLE  
Address: 133 SEABREEZE AVENUE  
City-St-Zip: PALM BEACH, FL 33408

Title: D  
Name: LUCHECHKO, ADRIANA  
Address: 686 FERN STREET  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: KENNETH CURTIN

PRES

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date