

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003386

FILED  
Apr 17, 2011  
Secretary of State

**Entity Name:** EAST NEIGHBORHOOD ASSOCIATION OF WILTON MANORS, INC.

**Current Principal Place of Business:**

524 N.E. 21ST COURT  
WILTON MANORS, FL 33305

**New Principal Place of Business:**

524 N.E. 21ST COURT  
WILTON MANORS, FL 33305 US

**Current Mailing Address:**

P.O. BOX 39392  
FT. LAUDERDALE, FL 33339

**New Mailing Address:**

P.O. BOX 39392  
FT. LAUDERDALE, FL 33339 US

FEI Number: 16-1635725

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELlich, CELESTE S  
1728 NE 27TH DRIVE  
WILTON MANORS, FL 33334 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: TRES  
Name: ELLICH, CELESTE S  
Address: 1728 NE 27TH DRIVE  
City-St-Zip: WILTON MANORS, FL 33334 US

Title: DIR  
Name: STANSELL, ED  
Address: 2112 N. E. 15TH AVENUE  
City-St-Zip: WILTON MANORS, FL 33305 US

Title: PRES  
Name: FIORE, JOHN  
Address: 2450 NE 15 AVENUE, #210  
City-St-Zip: WILTON MANORS, FL 33305 US

Title: SECT  
Name: NIXON, LAURA  
Address: 2307 NE 15 TER  
City-St-Zip: WILTON MANORS, FL 33305 US

Title: VP  
Name: DEPALMA, ME  
Address: 2117 N. E. 17TH TERRACE  
City-St-Zip: WILTON MANORS, FL 33305 US

Title: DIR  
Name: COMER, LAURA  
Address: 2312 N. E. 16TH AVENUE  
City-St-Zip: WILTON MANORS, FL 33305 US

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: CELESTE S. ELLICH

TRES

04/17/2011

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

\_\_\_\_\_  
Date