

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11220

FILED
Jun 27, 2009
Secretary of State

Entity Name: FLORAL PARK PROPERTY OWNERS' ASSOCIATION

Current Principal Place of Business:

2690 CAMBRIDGE RD
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

2690 CAMBRIDGE RD
LANTANA, FL 33462

New Mailing Address:

FEI Number: 59-2259689 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PIERREN, THOMAS
6579 EAST VIEW DR
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

PIERCE, THOMAS
6579 EAST VIEW DR
LANTANA, FL 33462 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: THOMAS PIERCE

06/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FICK, LARRY
Address: 2684 WORCHESTER RD
City-St-Zip: LAKE WORTH, FL 33462

Title: T () Delete
Name: PIERCE, THOMAS
Address: 6673 EASTVIEW DR.
City-St-Zip: LANTANA, FL 33462

Title: S () Delete
Name: ROE, PATSY
Address: 6648 WESTVIEW DR
City-St-Zip: LAKE WORTH, FL 33462

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FICK, LARRY PRES
Address: 2684 WORCHESTER RD
City-St-Zip: LANTANA, FL 33462 US

Title: T (X) Change () Addition
Name: PIERCE, THOMAS TRES
Address: 6575 EASTVIEW DR.
City-St-Zip: LANTANA, FL 33462 US

Title: S (X) Change () Addition
Name: PIERCE, SANDRA SEC
Address: 6575 EASTVIEW DRIVE
City-St-Zip: LANTANA, FL 33462 US

Title: VP () Change (X) Addition
Name: GRUETTER, BOB VPRES
Address: 2648 NORTHSIDE DRIVE
City-St-Zip: LANTANA, FL 33462 US

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: THOMAS PIERCE

TRES

06/27/2009

Electronic Signature of Signing Officer or Director

Date