

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2009
Secretary of State**

DOCUMENT# N94000004315

Entity Name: ARMOUR MANOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

479 TEQUESTA DR
UNIT 8
TEQUESTA, FL 33469 US

New Principal Place of Business:

Current Mailing Address:

479 TEQUESTA DR
UNIT 8
TEQUESTA, FL 33469 US

New Mailing Address:

FEI Number: 65-0649100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DAVID
479 TEQUESTA DRIVE #8
TEQUESTA, FL 33469 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: P () Delete
Name: JONES, DAVID
Address: 479 TEQUESTA DRIVE 8
City-St-Zip: TEQUESTA, FL 33469

Title: STD () Delete
Name: BUSHWAY, BONNIE
Address: 479 TEQUESTA DRIVE #7
City-St-Zip: JUPITER, FL 33469

Title: DVP () Delete
Name: TALOR, CHRISTOPHER
Address: 479 TEQUESTA DR., #3
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: BONNIE BUSHWAY

STD

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date