# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 28, 2008**
**Secretary of State**

DOCUMENT# N02000009140

**Entity Name:** WORTHINGTON OF PALM BEACH HOA, INC.

**Current Principal Place of Business:**

9099 NUGENT TRAIL
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

11360 FORTUNE CIRCLE
BLDG E-6A
WELLINGTON, FL 33414

**Current Mailing Address:**

9099 NUGENT TRAIL
WEST PALM BEACH, FL 33411

**New Mailing Address:**

C/O A & G MANAGEMEN11924 FOREST HILL BLVD.
SUITE 22-221
WELLINGTON, FL 33414

**FEI Number: 54-2108347** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

A & G MANAGEMENT SERVICES
11360 FORTUNE CIRCLE, SUITE E6A
WELLINGTON, FL 33414 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: VARNEY, TODD
Address: 9099 NUGENT TRAIL
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP ( ) Delete
Name: GERSTAN, DIANA
Address: 1874 WOOD GLENN CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: S ( ) Delete
Name: MEKALIAN, MICHAEL
Address: 9255 NUGENT TRAIL
City-St-Zip: WEST PALM BEACH, FL 33411

Title: T ( ) Delete
Name: ARMENTO, ROCCO
Address: 9298 NUGENT TRAIL
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D ( ) Delete
Name: HAASTRUP, MARK
Address: 9159 NUGENT TRAIL
City-St-Zip: WEST PALM BEACH, FL 33411

**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:

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: TODD VARNEY DP 04/28/2008

Electronic Signature of Signing Officer or Director — Date