2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706350

FILED Apr 07, 2009 Secretary of State

Entity Name: WILLIAMSBURG ASSOCIATION INC

Current Principal Place of Business: New Principal Place of Business: 3090 NE 48TH ST FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** C/O MANG. ASSIT., INC C/O RMS ACCOUNTING 2626 E. COMMERCIAL BLVD., #4 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33311 FEI Number: 59-1114221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANAGEMENT ASSIST., INC ROYALE MANAGEMENT SERVICES INC 2626 EAST COMMERCIAL BLVD., SUITE 4 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33311 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: THERESA J WEIL, VP 04/07/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition SLITKIN, KEN Name: Name: 3090 NE 48 ST #106 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: Title: () Delete () Change () Addition BELL, PETER Name: Name: Address: 3090 NE 48 STREET #105 Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: () Delete Title: () Change () Addition SEIDLE, RONALD Name: Name: 3090 NE 48ST 316 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: Title: DP Title: () Change () Addition () Delete Name: SCHIFF, PHILIP Name: 3090 NE 48 ST 319 Address: Address: FORT LAUDERDALE, FL 33308 City-St-Zip: City-St-Zip: Title: () Delete Title: DV (X) Change () Addition PADILLA, DAVID Name: Name: PADILLA, DAVID 3090 NE 48TH ST 3090 NE 48TH ST Address: Address: FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition SMOLLINGER, CARL Name: Name: Address: 3090 NE 48TH ST Address: FORT LAUDERDALE, FL 33308 City-St-Zip: 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: RONALD SEIDLE DT 04/07/2009