

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710668

FILED
Feb 17, 2009
Secretary of State

Entity Name: GREENBRIER ASSOCIATION , INC.,

Current Principal Place of Business:

1340 U.S. HIGHWAY #1
SUITE 102
JUPITER, FL 33469

New Principal Place of Business:

Current Mailing Address:

1340 U.S. HIGHWAY #1
SUITE 102
JUPITER, FL 33469

New Mailing Address:

FEI Number: 59-1160446 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUPITER MANAGEMENT, LLC
1340 US # 1, STE 102
JUPITER, 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: TD () Delete
Name: CHENETTE, HENRY
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

Title: PD () Delete
Name: WEBSTER, BARRY
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

Title: D () Delete
Name: CLEMENTS, MARION
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

Title: SD () Delete
Name: WALCZAK, SANDY
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

Title: D () Delete
Name: SIMLER, ANDREA
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

Title: VPD () Delete
Name: CULHANE, MICKEY
Address: 50 CELESTIAL WY
City-St-Zip: JUNO BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SPRATFORE, JANET
Address: 50 CELESTIAL WAY
City-St-Zip: JUNO BEACH, FL 33408

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

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

Title: VPD (X) Change () Addition
Name: LIPKIN, EDWARD
Address: 50 CELESTIAL WY
City-St-Zip: JUNO BEACH, FL 33408

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: STEVEN SKAKANDY

MGR

02/17/2009

Electronic Signature of Signing Officer or Director

Date