

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718783

FILED
Apr 08, 2010
Secretary of State

Entity Name: THE BILLOWS ASSOCIATION, INC.

Current Principal Place of Business:

% ELLIOTT MERRILL COMM. MGMT
835 20TH PL
VERO BEACH, FL 32960 US

New Principal Place of Business:

1180 REEF ROAD
VERO BEACH, FL 32963 US

Current Mailing Address:

% ELLIOTT MERRILL COMM. MGMT
835 20TH PL
VERO BEACH, FL 32960 US

New Mailing Address:

FEI Number: 59-1300505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINNON, CHARLES
3055 CARDINAL DR
THE ATRIUM BLDG.
VERO BEACH, FL 32963 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
Name: BLACK, CLINTON R
Address: 1180 REEF RD #C13
City-St-Zip: VERO BEACH, FL 32963

Title: VP
Name: MURPHY, JOHN P
Address: 1180 REEF RD #A18
City-St-Zip: VERO BEACH, FL 32963

Title: T
Name: LEARY, SANDRA G
Address: 1180 REEF RD #A17
City-St-Zip: VERO BEACH, FL 32963

Title: SD
Name: PIKE, BARBARA
Address: 1180 REEF ROAD # A26
City-St-Zip: VERO BEACH, FL 32963

Title: D
Name: GIBULA, RICHARD
Address: 1180 REEF ROAD #A22
City-St-Zip: VERO BEACH, FL 32963

Title: D
Name: PENNINGTON, SAMUEL
Address: 1180 REEF ROAD #A24
City-St-Zip: VERO BEACH, FL 32963

I hereby 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 all other like empowered.

SIGNATURE: CLINTON R. BLACK

P

04/08/2010

Electronic Signature of Signing Officer or Director

_____ Date