## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#719753** 

**FILED** Feb 10, 2010 Secretary of State

Entity Name: CASTLEWOOD TOWN VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

118 CASTLEWOOD DR.

NORTH PALM BEACH, FL 33408

**Current Mailing Address: New Mailing Address:** 

CASTLEWOOD TOWN VILLAS P O BOX 13125 NORTH PALM BEACH, FL 33408

FEI Number: 59-2068007 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:

ASSOCIATION MANAGEMENT OF THE PALM BEACHES 832 PROSPERITY FARMS ROAD

NORTH PALM BEACH, FL 33408 US DICKER, KRIVOK, & STOLOFF, P.A. 1818 AUSTRALIAN AVENUE SOUTH SUITE 400 WEST PALM BEACH, FL 33409 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: EDWARD DICKER, P.A. 02/10/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

AMUCHASTEGUI, FERNANDO Name: Address: 1050 SE 15TH ST #201 City-St-Zip: FORT LAUDERDALE, FL 33316

Title:

Name: SURACI, VIRGINIA

Address: 118 CASTLEWOOD DRIVE #120 City-St-Zip: NORTH PALM BEACH, FL 33408

Title: SD

BENNETT, WILLIAM Name: Address: 129 LEHANE TERRACE #139 City-St-Zip: NORTH PALM BEACH, FL 33408

Title: TD

Name: DZENUTIS, PETER

129 LEHANE TERRACE #132 Address: City-St-Zip: NORTH PALM BEACH, FL 33408

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: MIKE DONAGHY **LCAM** 02/10/2010