2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#720222

FILED Apr 08, 2009 Secretary of State

Entity Name: AUSTRALIAN-COCOANUT TOWNHOUSE ASSOCIATION, INC.

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

222 DATURA ST. / HARVEY BLDG 120 SO. OLIVE AVE.

807 SUITE. 209

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

PO BOX 368 PO BOX 2918

PALM BCH, FL 33480 PALM BCH, FL 33480

FEI Number: 59-1482193 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:

HALKETT, RICHARD
120 S. OLIVE AVE #209
HALLETT, RICHARD
120 SO. OLIVE AVE

WEST PALM BEACH, FL 33401 US #209

WEST PALM BEACH, FL 33401 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: RICHARD HALLETT 04/08/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

S () Delete Title: TD (X) Change () Addition

 Name:
 TOMURRAY, STEPHEN
 Name:
 MURRAY, STEPHEN

 Address:
 353 COCOANUT RD W
 Address:
 353 COCOANUT RD W

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
 PALM BEACH, FL 33480

Title: VPD () Delete Title: PD (X) Change () Addition

Name: LEIST, ALAN Name: LEIST, ALAN

 Address:
 337 AUSTRALIAN AVE.
 Address:
 337 AUSTRALIAN AVE.

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
 PALM BEACH, FL 33480

Title: DP () Delete Title: VPD (X) Change () Addition

Name:PALADINO, WILLIAMName:PALADINO, WILLIAMAddress:349 AUSTRALIAN AVENUEAddress:349 AUSTRALIAN AVENUECity-St-Zip:PALM BEACH, FL 33480City-St-Zip:PALM BEACH, FL 33480

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 HALLETT, RICHARD

 Address:
 Address:
 120 S. OLIVE AVE. # 209

 City-St-Zip:
 City-St-Zip:
 WEST PALM BEACH, FL 33401

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: RICHARD HALLETT S 04/08/2009