

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720283

FILED
Apr 07, 2009
Secretary of State

Entity Name: HILLSIDE HOUSE OF GULF STREAM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

200 LITTLE CLUB RD.
DELRAY BEACH, FL 334837554

New Principal Place of Business:

Current Mailing Address:

200 LITTLE CLUB RD.
DELRAY BEACH, FL 334837554

New Mailing Address:

FEI Number: 59-1353264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAWN, JOEL T
54 NE FOURTH AVENUE
DELRAY BEACH, FL 33483 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: AT () Delete
Name: DELFIANDRA, TONI
Address: 777 ATLANTIC AVE C-2-314
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD () Delete
Name: SYER, JACK
Address: 200 LITTLE CLUB RD
City-St-Zip: DELRAY BEACH, FL 33485

Title: PD () Delete
Name: STRAWN, JOEL T
Address: 200 LITTLE CLUB RD
City-St-Zip: DELRAY BCH, FL 00000,

Title: VD () Delete
Name: DEDERICK, GERALD F. JR.
Address: 200 LITTLE CLUB RD
City-St-Zip: DELRAY BCH, FL

Title: T () Delete
Name: BARROLL, LEWIS F
Address: 200 LITTLE CLUB ROAD
City-St-Zip: DELRAY BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: TONI DELFIANDRA

AT

04/07/2009

Electronic Signature of Signing Officer or Director

Date