

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722716

FILED
Apr 27, 2009
Secretary of State

Entity Name: WILBUR IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

4200 S PENINSULA DRIVE
WILBUR-BY-THE-SEA, FL 32127

New Principal Place of Business:

Current Mailing Address:

4200 S. PENINSULA DR.
WILBUR-BY-THE-SEA, FL 32127

New Mailing Address:

FEI Number: 59-2388702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, ROBERT
4026 CARDINAL BLVD
WILBUR-BY-THE-SEA, FL 32127 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: PD () Delete
Name: BURNS, SUE
Address: 4250 S. ATLANTIC AVE.
City-St-Zip: WILBUR-BY-THE-SEA, FL 32127

Title: VPD () Delete
Name: EDDINGTON, MELANIE
Address: 4248 S. ATLANTIC AVE.
City-St-Zip: WILBUR-BY-THE-SEA, FL 32127

Title: SD () Delete
Name: HARAPAS, CAROLINE
Address: 4112 ORIOLE AVE
City-St-Zip: WILBUR-BY-THE SEA, FL 32127

Title: TD () Delete
Name: MILLS, ROBERT
Address: 4026 CARDINAL BLVD
City-St-Zip: WILBUR-BY-THE-SEA, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: MARFOGLIA, LUCI
Address: 4050 S. PENINSULA DRIVE
City-St-Zip: WILBUR-BY-THE SEA, FL 32127

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: ROBERT L. MILLS

TD

04/27/2009

Electronic Signature of Signing Officer or Director

Date