

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723002

FILED  
Aug 24, 2009  
Secretary of State

Entity Name: TOWNSITE APARTMENTS V11, INC.

## Current Principal Place of Business:

417 NORTH "K" STREET  
LAKE WORTH, FL 33460

## New Principal Place of Business:

417 NORTH K STREET  
LAKE WORTH, FL 33460 PB

## Current Mailing Address:

P.O. BOX 290  
LAKE WORTH, FL 33460 US

## New Mailing Address:

FEI Number: 59-1420677 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BARTLETT, DAVID  
417 NORTH K ST # 2  
LAKE WORTH, FL 33460 US

## Name and Address of New Registered Agent:

DEMING, MARK  
417 NORTH K ST # 8  
LAKE WORTH, FL 33460 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: MARK DEMING

08/24/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: BARTLETT, DAVID  
Address: 417 NO K STE 2  
City-St-Zip: LAKE WORTH, FL 33460

Title: PD ( ) Delete  
Name: SEPPALA, ART  
Address: 417 N. K STE 5  
City-St-Zip: LAKE WORTH, FL 33460

Title: VD ( ) Delete  
Name: HEYBURN, CAROL  
Address: 1031 NO. J ST  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition  
Name: BARTLETT, DAVID  
Address: 417 NO. K ST. #2  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: PD (X) Change ( ) Addition  
Name: DEMING, MARK  
Address: 417 NO. K ST. #8  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: VD (X) Change ( ) Addition  
Name: DINDA, DAN  
Address: 417 NO. K ST. #1  
City-St-Zip: LAKE WORTH, FL 33460 US

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: MARK DEMING

PD

08/24/2009

Electronic Signature of Signing Officer or Director

Date