

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723689

FILED
Feb 12, 2009
Secretary of State

Entity Name: TOWNSITE APARTMENTS IX, INC.

Current Principal Place of Business:

% YETTA WEINER
430 N J ST, APT 3A
LAKE WORTH, FL 334603048

Current Mailing Address:

430 N J ST
LAKE WORTH, FL 334603048

New Principal Place of Business:

430 NORTH J ST
APT 3A
LAKE WORTH, FL 334603048

New Mailing Address:

430 NORTH J ST
APT 3A
LAKE WORTH, FL 334603048

FEI Number: 59-1420675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIENER, ALBERT
430 N "J" ST.
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

WIENER, ALBERT
430 N J ST
APT 3A
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:

02/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEINER, ALBERT
Address: 430 NORTH
City-St-Zip: LAKE WORTH, FL

Title: VP () Delete
Name: WEINER, YETTA
Address: 430 N. J. ST.
City-St-Zip: LAKE WORTH, FL

Title: S () Delete
Name: MOYLE, TOM
Address: 430 N
City-St-Zip: LAKE WORTH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEINER, ALBERT
Address: 430 NORTH J ST APT 3A
City-St-Zip: LAKE WORTH, FL 33460

Title: VP (X) Change () Addition
Name: WEINER, YETTA
Address: 430 NORTH J ST APT 3A
City-St-Zip: LAKE WORTH, FL 33460

Title: S (X) Change () Addition
Name: MOYLE, TOM
Address: 430 NORTH J STREET APT 2A
City-St-Zip: LAKE WORTH, FL 33460

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: TOM MOYLE

S

02/12/2009

Electronic Signature of Signing Officer or Director

Date