

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723805

FILED
Mar 02, 2009
Secretary of State

Entity Name: THE TOWNHOUSE VILLAS CONDOMINIUM, INC.

Current Principal Place of Business:

1329 NORTH 15TH AVENUE
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 220011
HOLLYWOOD, FL 33022

New Mailing Address:

FEI Number: 59-1450528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHEREMETA, MARK
1329 N. 15TH AVE.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD
C-207
FORT LAUDERDALE, FL 33312 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: CHARLES F. OTTO, ESQ.

03/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHEREMETA, MARK
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022 US

Title: VPD () Delete
Name: LYNN, HAROLD
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022 US

Title: SD () Delete
Name: LYNNE, KENNY
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022 US

Title: TD () Delete
Name: WEISS, SCOTT
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022

Title: ASD () Delete
Name: PALANT, DORI
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022 US

Title: D () Delete
Name: ALMEIDA, KEVIN
Address: P.O. BOX 220011
City-St-Zip: HOLLYWOOD, FL 33022 US

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:

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: MARK SHEREMETA

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date