2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2010
Secretary of State

DOCUMENT# 738807

Entity Name: ESTATES OF ALPINE WOODS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PROPERTY MANAGEMENT PARTNERS
7116 W MCNAB
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

C/O PROPERTY MANAGEMENT PARTNERS
7116 W MCNAB
TAMARAC, FL 33321 US

New Mailing Address:

FEI Number: 59-1801051 **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:

PROPERTY MANAGEMENT PARTNERS, INC
7116 WEST MCNAB ROAD
TAMARAC, FL 33321 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: P
Name: TABOR, DAVE
Address: 8633 BRIDLE PATH CT.
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: S
Name: GEMMILL, BILLIE
Address: 8684 BRIDLE PATH CT.
City-St-Zip: DAVIE, FL 33328

Title: VP
Name: VALSAMIS, ANNA
Address: 8688 BRIDLE PATH COURT
City-St-Zip: DAVIE, FL 33328

Title: D
Name: BERGMAN, JIM
Address: 8647 BRIDLE PATH COURT
City-St-Zip: DAVIE, FL 33328

I hereby 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 all other like empowered.

SIGNATURE: MARYANN PRINCIPATO LCAM 05/11/2010
Electronic Signature of Signing Officer or Director Date