2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# 740675

Entity Name: ESTANCIA WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 59-1797564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 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: WILLIAM K. ISAACSON 04/17/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: COHEN, BONNIE
Address: 7690 ESTRELLA CIR
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: COHEN, BONNIE L
Address: 7690 ESTRELLA CIR
City-St-Zip: BOCA RATON, FL 33433

Title: P ( ) Change (X) Addition
Name: NADLER, HARRY
Address: 7409 ESTRELLA CIR
City-St-Zip: BOCA RATON, FL 33433

Title: VP ( ) Change (X) Addition
Name: ROGERS, ROBERT
Address: 20992 SOLANO WAY
City-St-Zip: BOCA RATON, FL 33433

Title: S ( ) Change (X) Addition
Name: JEFFERNAN, JOE
Address: 7570 ESTRELLA CIR
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Change (X) Addition
Name: WINESS, MICHAEL
Address: 20957 CIPRES WAY
City-St-Zip: BOCA RATON, FL 33433

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: BONNIE L. COHEN T 04/17/2009
Electronic Signature of Signing Officer or Director Date