

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743685

FILED
Apr 01, 2010
Secretary of State

Entity Name: BREEZEWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3339 GARDENS EAST DR, APT A
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

3339 GARDENS EAST DRIVE
APT A
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3339 GARDENS EAST DR, APT A
PALM BEACH GARDENS, FL 33410

New Mailing Address:

3339 GARDENS EAST DRIVE
APT A
PALM BEACH GARDENS, FL 33410

FEI Number: 59-2263634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROVES, ANN
3339 GARDENS EAST DR, APT A
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

GROVES, ANN
3339 GARDENS EAST DRIVE
APT A
PALM BEACH GARDENS, FL 33410 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:

04/01/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: GROVES, ANN
Address: 3339 A GARDENS EAST DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD
Name: SCULLY, BARBARA
Address: 3339 B GARDENS EAST DRIVE
City-St-Zip: P.BCH.GARDENS, FL 33410

Title: P
Name: ONEILL, OWEN
Address: 3349 D GARDENS EAST DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP
Name: ROCHE, WILLIAM
Address: 3359 D GARDENS EAST DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: ANN GROVES

TD

04/01/2010

Electronic Signature of Signing Officer or Director

Date