2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744912

FILED Apr 30, 2009 Secretary of State

Entity Name: TOWN SQUARE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4848 NW 24TH COURT LAUDERDALE LAKES, FL 33313 **Current Mailing Address: New Mailing Address:** 4848 NW 24TH COURT LAUDERDALE LAKES, FL 33313 FEI Number: 59-2003425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, CARLA A ESQ. 1999 S.W. 27TH AVENUE, FIRST FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition THOMAS, DAVID Name: Name: 4848 NW 24 CT., #235 Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: Title: () Delete Title: () Change () Addition BRANTLEY, KIM Name: Name: Address: 4848 NW 24TH CT #215 Address: City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change () Addition ALVAREZ, ALBERTO KING, RICHARD Name: Name: 4848 NW 24TH CT #429 Address: Address: 4848 NW 24TH CT #218 City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: LAUDERDALE LAKES, FL 33313 Title: SD () Delete Title: SD (X) Change () Addition Name: HARDEN, KURT Name: DAVIS, ERICEA Address: 4848 NW 24 CT., #431 Address: 4848 NW 24 CT., #323 City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: LAUDERDALE LAKES, FL 33313 Title: () Delete Title: () Change () Addition DUPREE, MARTHENIA DR, Name: Name: 4848 NW 24TH CT #109 Address: Address: City-St-Zip: LAUDERDALE LAKES, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change () Addition KING, RICHARD SEVERIN, DARNEY R Name: Name: Address: 4848 NW 24TH CT #218 Address: 4848 NW 24TH CT # 316 LAUDERDALE LAKES, FL 33313 LAUDERDALE LAKES, FL 33313 City-St-Zip: 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: JACQUELINE E. HAWKINS OFF 04/30/2009