2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# 745908

Entity Name: THE CASTLEWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

243 CASTLEWOOD DRIVE
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

243 CASTLEWOOD DRIVE
5
NORTH PALM BEACH, FL 33408

Current Mailing Address:

8001 FAIRWAY LANE
WEST PALM BEACH, FL 33412

New Mailing Address:

FEI Number: 59-1981717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERT E. HAYES
8001 FAIRWAY LANE
WEST PALM BEACH, FL 33412 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: PD ( ) Delete
Name: HAYES, ROBERT
Address: 243 CASTLEWOOD DRIVE #7
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VPD ( ) Delete
Name: DAVID, O'BRIEN
Address: 243 CASTLEWOOD DRIVE #4
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD ( ) Delete
Name: COULTER, KATHLEEN
Address: 243 CASTLEWOOD DRIVE #5
City-St-Zip: NORTH PALM BEACH, FL 33408

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:

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: KATHLEEN KANOFF STD 02/06/2009

Electronic Signature of Signing Officer or Director — Date