## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#746269**

FILED Apr 07, 2009 Secretary of State

Entity Name: GREENS CAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458 **New Mailing Address: Current Mailing Address:** 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458 US FEI Number: 59-2194758 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: INGLIS, STEVE 1930 COMMERCE LANE SUITE 1 JUPITER, FL 33458 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 O'DAY, SALLY Name: Name: 17072 TRAVERSE CIRCLE Address: Address: City-St-Zip: JUPITER, FL 33477 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DIDONATO, RICKEY Name: FUZY, ROBERT Name: Address: 17064 TRAVERSE CIRCLE Address: 17060TRAVERSE CIRCLE City-St-Zip: JUPITER, FL 33477 US City-St-Zip: JUPITER, FL 33477 US Title: () Delete Title: (X) Change ( ) Addition ROBBINS, GRACE ROBBINS, GRACE Name: Name: 17068 TRAUERSE CIR. 17068 TRAVERSE CIR. Address: Address: City-St-Zip: JUPITER, FL 33477 US City-St-Zip: JUPITER, FL 33477 US ( ) Delete Title: Title: (X) Change ( ) Addition Name: EVANS, DIANE Name: DIDONATO, RICKY 17024 TRAVERSE CIR. 17064 TRAVERSE CIR. Address: Address: City-St-Zip: JUPITER, FL 33477 US City-St-Zip: JUPITER, FL 33477 US Title: ( ) Delete Title: (X) Change ( ) Addition FUZY, BOB ROBBINS, GRACE Name: Name: 17060 TRAVERSE CIRCLE 17068 TRAVERSE CIRCLE Address: Address: JUPITER, FL 33477 US City-St-Zip: City-St-Zip: JUPITER, FL 33477 US

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: SALLY O'DAY P 04/07/2009