

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748777

FILED
Mar 23, 2009
Secretary of State

Entity Name: NORMANDY TOWER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% BARBARA SEELEY
2743 NE 28 CT., #11
LIGHTHOUSE PT, FL 33064

New Principal Place of Business:

% BARBARA SEELEY
2743 NE 28 CT., #1
LIGHTHOUSE PT, FL 33064

Current Mailing Address:

% BARBARA SEELEY
2743 NE 28 CT., #11
LIGHTHOUSE PT, FL 33064

New Mailing Address:

% BARBARA SEELEY
2743 NE 28 CT., #1
LIGHTHOUSE PT, FL 33064

FEI Number: 59-1978569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RENARD, JEAN
2743 N.E. 28TH COURT
5
LIGHTHOUSE POINT, FL 33064 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: D () Delete
Name: BOHNER, BETTY,
Address: 2743 NE 28TH CT #3
City-St-Zip: LIGHTHOUSE PT, FL

Title: S () Delete
Name: MATINE, MARIE
Address: 2743 N.E. 28TH COURT
City-St-Zip: LIGHTHOUSE PT., FL

Title: T () Delete
Name: RENARD, JEAN
Address: 2743 NE 28TH CT
City-St-Zip: LIGHTHOUSE POINT, FL 33067

Title: P () Delete
Name: MARSENISON, PAULA
Address: 2743 NE 28TH CT
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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:

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: PAULA MARSENISON

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date