

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749627

FILED
May 01, 2009
Secretary of State

Entity Name: TOWNHOMES OF AUDUBON ASSOCIATION, INC.

Current Principal Place of Business:

381 N KROME AVENUE #205
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

PO BOX 901773
HOMESTEAD, FL 33090

New Mailing Address:

FEI Number: 59-2457678 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SCHMATENBERG & ASSOCIATES
1533 SUNSET DRIVE
MIAMI, FL 33143 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:

Title: PD () Delete
Name: BUTLER, ANDREA
Address: 1261 SANDPIPER BLVD
City-St-Zip: HOMESTEAD, FL 33035

Title: TD () Delete
Name: TOOHEY, SANDY
Address: 1312 SANDPIPER BLVD
City-St-Zip: HOMESTEAD, FL 33035

Title: SD () Delete
Name: BEACHEA, MARILYN
Address: 1321 SANDPIPER BLVD
City-St-Zip: HOMESTEAD, FL 33035

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: ANDREA BUTLER

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date