

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750546

FILED
Jan 21, 2009
Secretary of State

Entity Name: THE TOWNS I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1190 PELICAN BAY DR
DAYTONA BEACH, FL 32119 US

New Principal Place of Business:

Current Mailing Address:

1190 PELICAN BAY DR
DAYTONA BEACH, FL 32119 US

New Mailing Address:

FEI Number: 59-2069823

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKIN, MICHELE N
C/O NELSON & SELWITZ, PROPERTY MGMT.
1190 PELICAN BAY DR
DAYTONA BEACH, FL 32119 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: DUMAS, JANET
Address: 160 BLACK DUCK
City-St-Zip: DAYTONA BEACH, FL 32119

Title: VPD () Delete
Name: MCCAULEY, GARY
Address: 184 SURF SCOOTER
City-St-Zip: DAYTONA BEACH, FL 32119

Title: SD () Delete
Name: HUDSON, JANET
Address: 116 SURF SCOOTER
City-St-Zip: DAYTONA BEACH, FL 32119

Title: TD () Delete
Name: MC PHERSON, MARYLOU
Address: 501 BROWN PELICAN
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: TOLEDANO, MIKE
Address: 188 BLACK DUCK
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: HUDSON, JANET
Address: 116 SURF SCOOTER
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D (X) Change () Addition
Name: SCHROERING, MARTIN
Address: 145 BLACK DUCK
City-St-Zip: DAYTONA BEACH, FL 32119

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: JANET DUMAS

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date