

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751945

FILED
Mar 31, 2009
Secretary of State

Entity Name: FRENCHMEN'S LANDING PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BRISTOL MANAGEMENT SERVICES
1930 COMMERCE LANE SUITE 1
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

C/O BRISTOL MANAGEMENT SERVICES
1930 COMMERCE LANE SUITE 1
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 59-2368541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGLIS, STEVE
C/O BRISTOL MANAGEMENT SERVICES, INC.
1930 COMMERCE LANE SUITE 1
JUPITER, FL 33458 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: T () Delete
Name: COLCLASURE, JOHN
Address: 12995 CALAIS CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: DYKINGA, JOHN
Address: 12940 LAROCHELLE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: PETERS, JOHN
Address: 12900 CALAS CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: MARTIN, TIM
Address: 12976 LAROCHELLE CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: HAROY, KEITH
Address: 12844 CALAS CIRCLE LE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: PETERS, JOHN
Address: 12900 CALAIS CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

Title: D (X) Change () Addition
Name: HARDY, KEITH
Address: 12844 CALAS CIRCLE LE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P () Change (X) Addition
Name: MOYLES, JANET
Address: 12987 LAROCHELLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 MOYLES

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date