

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752981

FILED
Apr 25, 2012
Secretary of State

Entity Name: ARBORWOOD VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

299 WEST CAMINO GARDENS BLVD
203
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

299 WEST CAMINO GARDENS BLVD
203
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 59-2071683

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:

STEVENS AND GOLDWYN PA
2 S UNIVERSITY DR
315
PLANTATION, FL 33324 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: AMANDA TALYOR, AGENT

04/25/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MARIE, SETTIMI
Address: 299 WEST CAMINO GARDENS BLVD #203
City-St-Zip: BOCA RATON, FL 33432

Title: S
Name: VALERIOTI, DONNA
Address: 299 WEST CAMINO GARDENS BLVD #203
City-St-Zip: BOCA RATON, FL 33432

Title: T
Name: MAURO, GISELA
Address: 299 WEST CAMINO GARDENS BLVD #203
City-St-Zip: BOCA RATON, FL 33432

Title: P
Name: CLYMAN, HOWARD
Address: 299 WEST CAMINO GARDENS BLVD #203
City-St-Zip: BOCA RATON, FL 33432

Title: VP
Name: JARET, ELAINE
Address: 299 WEST CAMINO GARDENS BLVD #203
City-St-Zip: BOCA RATON, FL 33432

I hereby 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 all other like empowered.

SIGNATURE: HOWARD CLYMAN

P

04/25/2012

Electronic Signature of Signing Officer or Director

Date