

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Aug 05, 2009  
Secretary of State**

DOCUMENT# 753914

**Entity Name:** TOWNHOMES OF LAKE SEMINOLE CONDOMINIUM NO. 5, ASSOCIATION, INC.**Current Principal Place of Business:**C/O BUXTON PROPERTIES  
147 BELCHER ROAD, SUITE 2  
LARGO, FL 33771 US**New Principal Place of Business:**1301 SEMINOLE BLVD  
SUITE 110  
LARGO, FL 33770 US**Current Mailing Address:**C/O BUXTON PROPERTES  
147 BELCHER ROAD  
LARGO, FL 33771 US**New Mailing Address:**1301 SEMINOLE BLVD  
SUITE 110  
LARGO, FL 33770 US

FEI Number: 59-2069887

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BUXTON, BRIAN P.  
147 BELCHER ROAD, N.  
STE.2  
LARGO, FL 33771 US**Name and Address of New Registered Agent:**QUALIFIED PROPERTY MANAGEMENT, INC.  
1301 SEMINOLE BLVD  
STE 110  
LARGO, FL 33770 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: MELISSA WADE

08/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: MACDONALD, DONALD  
Address: 9209 SEMINOLE BLVD #175  
City-St-Zip: SEMINOLE, FL 33772 USTitle: ST ( ) Delete  
Name: PARRINELLO, ROSEMARY  
Address: 9209 SEMINOLE BLVD #181  
City-St-Zip: SEMINOLE, FL 33772 USTitle: D ( ) Delete  
Name: MOGLE, JEAN  
Address: 9209 SEMINOLE BLVD #177  
City-St-Zip: SEMINOLE, FL 33772 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: MACDONALD, DONALD  
Address: 1301 SEMINOLE BLVD, SUITE110  
City-St-Zip: LARGO, FL 33770 USTitle: ST (X) Change ( ) Addition  
Name: PARRINELLO, ROSEMARY  
Address: 1301 SEMINOLE BLVD, SUITE110  
City-St-Zip: LARGO, FL 33770 USTitle: D (X) Change ( ) Addition  
Name: MOGLE, JEAN  
Address: 1301 SEMINOLE BLVD, SUITE110  
City-St-Zip: LARGO, FL 33770 US

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: MELISSA WADE

ADMN

08/05/2009

Electronic Signature of Signing Officer or Director

Date