

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755991

FILED
Apr 16, 2009
Secretary of State

Entity Name: POINCIANA VILLAGE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3150 VIA POINCIANA
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

3150 VIA POINCIANA
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 59-2166048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAPIRO, PAUL
3154 VIA POINCIANA
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

PMS, INC
3150 VIA POINCIANA
LAKE WORTH, FL 33467 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: PAUL SHAPIRO

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHAPIRO, PAUL
Address: 3154 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL

Title: DST () Delete
Name: KREINDEL, IRWIN
Address: 6768 10TH AVENUE NORTH
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP () Delete
Name: WAXMAN, BUD
Address: 6850 10TH AVE N
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP () Delete
Name: FALK, IRWIN
Address: 3386 ARCARA WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP () Delete
Name: MEYERS, MARLENE
Address: 6698 10TH AVENUE NORTH
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WAXMAN, BUD
Address: 6768 10TH AVENUE NORTH 211
City-St-Zip: LAKE WORTH, FL

Title: DT (X) Change () Addition
Name: KREINDEL, IRWIN
Address: 6768 10TH AVENUE NORTH 411
City-St-Zip: LAKE WORTH, FL 33467

Title: DS (X) Change () Addition
Name: MEYERS, MARLENE
Address: 6698 10TH AVE N 406
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Change () Addition
Name: FALK, IRWIN
Address: 3386 ARCARA WAY 413
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Change () Addition
Name: SHAPIRO, PAUL
Address: 3150 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

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: BUD WAXMAN

DP

04/16/2009

Electronic Signature of Signing Officer or Director

Date