

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756960

FILED
Mar 19, 2009
Secretary of State

Entity Name: MIDDLE RIVER TOWNHOUSES ASSOCIATION, INC.

Current Principal Place of Business:

97 NE 17TH CT
FT. LAUDERDALE, FL 33305 US

New Principal Place of Business:

Current Mailing Address:

97 NE 17TH CT
FT. LAUDERDALE, FL 33305 US

New Mailing Address:

FEI Number: 59-2267447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIRES, KARL
97 NE 17TH CT
FT. LAUDERDALE, FL 33305 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: SD () Delete
Name: KIMBALL, KEVIN
Address: 81 NE 17TH CT
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: TD () Delete
Name: SHIRES, KARL
Address: 87 N.E. 17TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VPD () Delete
Name: BUCOLO, JAMES
Address: 93 NE 17TH CT
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D () Delete
Name: SANDER, ANN
Address: 89 NE 17TH CT
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: PD () Delete
Name: BURNS, TIM
Address: 85 NE 17TH CT
City-St-Zip: FORT LAUDERDALE, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: KARL SHIRES

TD

03/19/2009

Electronic Signature of Signing Officer or Director

Date