

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757117

FILED
Apr 06, 2009
Secretary of State

Entity Name: VIBURNUM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1200 S ROGERS CIRCLE
STE 3
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

1200 S ROGERS CIRCLE
STE 3
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-2821482 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPPMAN, KAREN
1200 S ROGERS CIRCLE
BOCA RATON, FL 33487 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: 2VP () Delete
Name: UNTENER, GEORGE
Address: 5395 VIBURNUM CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

Title: 1VP () Delete
Name: SAMANO, ANTONIO
Address: 5392 VIBURNUM CIR
City-St-Zip: DELRAY BEACH, FL 33484

Title: S () Delete
Name: HOLMES, MARTIN
Address: 5408 VIBURNUM CIRCLE
City-St-Zip: DELRAY BCH, FL 33484

Title: T () Delete
Name: PATICOFF, HENRY
Address: 5323 VIBURNUM CIRCLE
City-St-Zip: DELRAY BCH, FL 33484

Title: P () Delete
Name: FELDMAN, LOIS
Address: 5407 VIBURNON ST
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 2VP (X) Change () Addition
Name: UNTENER, GEORGE
Address: 5395 VIBURNUM CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

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

Title: P (X) Change () Addition
Name: HOLMES, MARTIN
Address: 5408 VIBURNUM CIRCLE
City-St-Zip: DELRAY BCH, FL 33484

Title: T (X) Change () Addition
Name: HOLMES, LORRAINE
Address: 5408 VIBURNUM CIRCLE
City-St-Zip: DELRAY BCH, FL 33484

Title: S (X) Change () Addition
Name: POTISH, HERB
Address: 5408 VIBURNUM CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

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: MARTIN HOLMES

P

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date