# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 30, 2009**
**Secretary of State**

DOCUMENT# 757366

**Entity Name:** GLENWOOD VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O C.A.M.S. PLUS, INC.
4524 GUN CLUB RD #105
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

C/O C.A.M.S. PLUS, INC.
4524 GUN CLUB RD #105
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**FEI Number: 59-2132250** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAMS PLUS INC.
C/O KIM FOOSE
4524 GUN CLUB ROAD #105
WEST PALM BEACH, FL 33415 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: PD ( ) Delete
Name: GIBSON, JOI
Address: 4641 PERTH RD
City-St-Zip: W PALM BEACH, FL 33415

Title: STD ( ) Delete
Name: COMMANDER, JON
Address: 4524 GUN CURB RD #105
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VPD ( ) Delete
Name: LEDER, DALE
Address: 4634 PERTH ROAD
City-St-Zip: WEST PALM BEACH, FL 33415

**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:

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: KIM SAUNDERS FOR CAMSPLUS RA 03/30/2009

Electronic Signature of Signing Officer or Director — Date