

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Feb 14, 2012**  
**Secretary of State**

DOCUMENT# 758303

**Entity Name:** ADAMS HOUSE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

ADAMS HOUSE C/O DONALD W. DENTON  
421 CHILEAN AVENUE  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

**Current Mailing Address:**

ADAMS HOUSE C/O DONALD W. DENTON  
P. O. BOX 2685  
PALM BEACH, FL 33480 US

**New Mailing Address:**

**FEI Number:** 59-2385310      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DENTON, DONALD W  
421 CHILEAN AVENUE  
PALM BEACH, FL 33480 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:** VPD  
**Name:** MATTHEWS, BETSY K  
**Address:** 417 CHILEAN AVE.  
**City-St-Zip:** PALM BEACH, FL 33480 US

**Title:** STD  
**Name:** BELISLE, MICHAEL  
**Address:** 419 CHILEAN AVENUE  
**City-St-Zip:** PALM BEACH, FL 33480 US

**Title:** PD  
**Name:** DENTON, DONALD W  
**Address:** 421 CHILEAN AVENUE  
**City-St-Zip:** PALM BEACH, FL 33480 US

I hereby 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 all other like empowered.

SIGNATURE: DONALD W. DENTON

PD

02/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date