

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760758

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** WEXFORD COURT TOWNHOMES PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

220 CELESTIAL WAY  
UNIT 5  
JUNO BEACH, FL 33408

**New Principal Place of Business:**

**Current Mailing Address:**

220 CELESTIAL WAY  
UNIT 5  
JUNO BEACH, FL 33408

**New Mailing Address:**

**FEI Number:** 59-2354738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ST. JOHN, CORE & LEMME, P.A.  
1601 FORUM PLACE  
SUITE 701  
WEST PALM BEACH, FL 33401 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: P ( ) Delete  
Name: HAMILTON, ROBERT J  
Address: 220 CELESTIAL WAY #6  
City-St-Zip: JUNO BEACH, FL 33408

Title: T ( ) Delete  
Name: GIBSON, CONNIE  
Address: 220 CELESTIAL WAY #6  
City-St-Zip: JUNO BEACH, FL 33408

Title: VP ( ) Delete  
Name: GIBSON, ROBERT  
Address: 220 CELESTIAL WAY # 5  
City-St-Zip: JUNO BEACH, FL 33408

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: GIBSON, CONNIE  
Address: 220 CELESTIAL WAY #5  
City-St-Zip: JUNO BEACH, FL 33408

Title: VP (X) Change ( ) Addition  
Name: GIBSON, ROBERT  
Address: 220 CELESTIAL WAY # 5  
City-St-Zip: JUNO BEACH, FL 33408

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: CONNIE GIBSON

T

01/07/2009

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

\_\_\_\_\_  
Date