

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761837

FILED
Apr 06, 2009
Secretary of State

Entity Name: HYPOLUXO WEST PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 6066
LAKE WORTH, FL 33466066 US

New Principal Place of Business:

4869 POSEIDON PLACE
LAKE WORTH, FL 33463 US

Current Mailing Address:

P O BOX 6066
LAKE WORTH, FL 33466066 US

New Mailing Address:

P O BOX 6066
LAKE WORTH, FL 33466066 US

FEI Number: 59-2466421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE, DIANE
4869 POSEIDON PLACE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

LAWRENCE, DIANE PRESIDE
4869 POSEIDON PLACE
LAKE WORTH, FL 33463 US

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: DIANE LAWRENCE

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GIEDINGHAGEN, CAROL
Address: 4871 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL

Title: V () Delete
Name: GARY PORTERFIELD
Address: 6902 ATHENA DR
City-St-Zip: LAKE WORTH, FL 33463

Title: PD () Delete
Name: LAWRENCE, DIANE
Address: 4869 POSEIDON PL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: GIEDINGHAGEN, CAROL TREASUR
Address: 4871 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL 33463

Title: V (X) Change () Addition
Name: PORTERFIELD, GARY VP
Address: 6902 ATHENA DR
City-St-Zip: LAKE WORTH, FL 33463

Title: PD (X) Change () Addition
Name: LAWRENCE, DIANE PRESIDE
Address: 4869 POSEIDON PL
City-St-Zip: LAKE WORTH, FL 33463

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: DIANE LAWRENCE

PRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date