

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768981

FILED  
Mar 23, 2009  
Secretary of State

**Entity Name:** ABERDEEN PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CAMPBELL PROPERTY MANAGEMENT  
3918 VIA POINCIANA STE 9  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CAMPBELL PROPERTY MANAGEMENT  
3918 VIA POINCIANA STE 9  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 59-2324875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ST.JOHN, CORE & LEMME, PA.  
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: VP ( ) Delete  
Name: ROSOFF, MRYNA  
Address: 7019 BITTRBUSH PL  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD ( ) Delete  
Name: GELERMAN, MARTIN  
Address: 7971 ROCKFORD RD  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S ( ) Delete  
Name: ZOBAL, DORIS  
Address: 5915 PARKWALK CR. W  
City-St-Zip: BOYNTON BEACH, FL 33472

Title: TD ( ) Delete  
Name: WEISSMAN, MARTIN  
Address: 6991 FAIRWAY LAKES DR  
City-St-Zip: BOYNTON BEACH, FL 33437

**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:

Title: TD (X) Change ( ) Addition  
Name: FELLER, ALAN  
Address: 6811 FAIRWAY LAKES DR  
City-St-Zip: BOYNTON BEACH, FL 33437

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: ALAN FELLER

TD

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date