2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770412

FILED Apr 25, 2012 Secretary of State

Entity Name: GOVERNORS POINT TOWNHOMES HOMEOWNERS' ASSOCIATION WEST, INC.

Current Principal Place of Business: New Principal Place of Business:

110 N. ORLANDO AVE.
SUITE 6
110 N. ORLANDO AVE.
SUITE 14

MAITLANDO, FL 32751 MAITLANDO, FL 32751

Current Mailing Address: New Mailing Address:

110 N. ORLANDO AVE.
SUITE 6
MAITLANDO, FL 32751

110 N. ORLANDO AVE.
SUITE 14
MAITLANDO, FL 32751

MAITLANDO, FL 32751

FEI Number: 59-2645767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TOP NOTCH MANAGEMENT SERVICES

110 N. ORLANDO AVE

\$1 | 115 | 6 |

SUITE 6

SUITE 6 SUITE 14
MAITLAND, FL 32751 US MAITLAND, FL 32751 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: 04/25/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 BONNER, JOHN

 Address:
 585 ALBANY PL

 City-St-Zip:
 LONGWOOD, FL
 32779

Title: VPSD

Name: SULLIVAN, JACK
Address: 613 ALBANY PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: TD

Name: WILLIAMS, BOB
Address: 456 NEWTON PLACE
City-St-Zip: LONGWOOD, FL 32779

Title:

 Name:
 DAVIS, BRODERICK

 Address:
 451 NEWTON PLACE

 City-St-Zip:
 LONGWOOD, FL 32779

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: MARILYN VINCE CAM 04/25/2012