

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003848

**FILED**  
**Apr 08, 2010**  
**Secretary of State**

**Entity Name:** NORTHWOOD SHORES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

322 35TH STREET  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

322 35TH STREET  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

WEEKS, MICHAEL A ESQ  
215 SOUTH OLIVE AVENUE  
401  
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: D  
Name: FLICK, CARL  
Address: 221 34TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SD  
Name: STARKEY, BETTE A  
Address: 213 29TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD  
Name: HULL, HAROLD  
Address: 311 28TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: PD  
Name: WEEKS, MICHAEL  
Address: 322 35TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D  
Name: DUNCAN, JULIE  
Address: 315 35TH STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

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: MICHAEL A. WEEKS

PD

04/08/2010

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

\_\_\_\_\_  
Date