

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006187

FILED
May 03, 2009
Secretary of State

Entity Name: WILLA PARK/ MORNINGSIDE PARK/ MACKLE PARK/ NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

924 ALMERIA RD.
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

924 ALMERIA RD.
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-1052838 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMAS, CONBOY V
924 ALMERIA RD.
WEST PALM BEACH, FL 33405 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 () Delete
Name: CONBOY, THOMAS V
Address: 924 ALMERIA ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: PEARSON, TOM
Address: 903 ANDREWS AVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: PEREZ, JUAN
Address: 3021 RIDGEWAY AVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: JOE, ROCCHIO
Address: 924 OMAR RD.
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: SANCHEZ, ROJES
Address: 2727 PARKER AVE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: KINSELLA, JANET
Address: 1010 ANDREWS ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: DARRELL, CHRISTOPHER
Address: 915 OMAR RD.
City-St-Zip: WEST PALM BEACH, FL 33405

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

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: THOMAS V. CONBOY

D

05/03/2009

Electronic Signature of Signing Officer or Director

Date