

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008953

FILED
Apr 28, 2009
Secretary of State

Entity Name: MALLORY SQUARE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2328 S CONGRESS AVE
STE 1-C
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

2328 S CONGRESS AVE
STE 1-C
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 16-1663298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID M. BECKERMAN, PA
7000 WEST PALMETTO PARK ROAD
SUITE 500
BOCA RATON, FL 33433 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: P () Delete
Name: KIRKCONNELL, BRIAN
Address: 383 E. MALLORY CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: FELBERBAUM, LEONARD
Address: 516 S. MALLORY CR.
City-St-Zip: DELRAY BEACH, FL 33483

Title: S () Delete
Name: MCDOWELL, DONALD
Address: 336 W MALLORY CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: MEIER, ELAINE
Address: 348 W MALLORY CIRCLE
City-St-Zip: DELRAY BEACH, FL 33483

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: BRYAN KIRKCONNELL

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date