## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000002273

The Hiled Nov 30, 2009

Secretary of State

Entity Name: PHIPPS VILLAGE HOMEOWNERS ASSOCIATION, INC.

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

4400 W SAMPLE RD STE 200 COCONUT CREEK, FL 330733450

Current Mailing Address: New Mailing Address:

4400 W SAMPLE RD STE 200 COCONUT CREEK, FL 330733450

FEI Number: 38-3813853 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:

BEER, TR CARTER, JOHN

4400 W SAMPLE RD STE 200
COCONUT CREEK, FL 33073 US
4400 W SAMPLE RD STE 200
COCONUT CREEK, FL 33073 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: JOHN CARTER 11/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DV ( ) Delete Title: DV (X) Change ( ) Addition

Name: BEER, T.R. Name: CARTER, JOHN

 Address:
 4400 W SAMPLE RD STE 200
 Address:
 4400 W SAMPLE RD STE 200

 City-St-Zip:
 COCONUT CREEK, FL 330733450
 City-St-Zip:
 COCONUT CREEK, FL 330733450

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition

Name: LONG, THOMAS Name: APPLEMAN, JON

 Address:
 4400 W SAMPLE ROAD STE 200
 Address:
 4400 W SAMPLE ROAD STE 200

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:
 COCONUT CREEK, FL 33073

Title: DST ( ) Delete Title: DST (X) Change ( ) Addition

 Name:
 RODGERS, FRANK
 Name:
 STERN, JARED

 Address:
 4400 W SAMPLE RD STE 200
 Address:
 4400 W SAMPLE RD STE 200

Address: 4400 W SAMPLE RD STE 200 Address: 4400 W SAMPLE RD STE 200 City-St-Zip: COCONUT CREEK, FL 330733450 City-St-Zip: COCONUT CREEK, FL 330733450

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: JOHN CARTER DP 11/30/2009