

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000269

FILED
Feb 12, 2005
Secretary of State

Entity Name: POINCIANA PLACE TOWNHOME ASSOCIATION, INC.

Current Principal Place of Business:

1315 NE 2ND STREET
UNIT 5
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

1309 NE 2ND STREET
FORT LAUDERDALE, FL 33301 US

Current Mailing Address:

1315 NE 2ND STREET
UNIT 5
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

1309 NE 2ND STREET
FORT LAUDERDALE, FL 33301 US

FEI Number: 20-1308647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COUCH, GEORGE T
1315 NE 2ND STREET
UNIT 5
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

PARTHEMER, AARON R
1309 NE 2ND STREET
FORT LAUDERDALE, FL 33301 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: AARON R PARTHEMER

02/12/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PARTHEMER, AARON R
Address: 1309 NE 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: DVPS () Delete
Name: MAHAN, MARY BETH
Address: 1313 NE 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: DT () Delete
Name: COUCH, GEORGE T
Address: 1315 NE 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPS (X) Change () Addition
Name: JOHNS, BLANCA
Address: 1311 NE 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: DT (X) Change () Addition
Name: HENNEKENS, JENNIFER
Address: 1313 NE 2ND STREET
City-St-Zip: FORT LAUDERDALE, FL 33301 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AARON R PARTHEMER

DP

02/12/2005

Electronic Signature of Signing Officer or Director

Date