

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002248

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: TRILLIUM HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

2541 METROCENTRE BLVD  
SUITE 1  
WEST PALM BEACH, FL 33407

## Current Mailing Address:

2541 METROCENTRE BLVD  
SUITE 1  
WEST PALM BEACH, FL 33407

## New Principal Place of Business:

2540 METROCENTRE BLVD  
SUITE 3  
WEST PALM BEACH, FL 33407

## New Mailing Address:

2540 METROCENTRE BLVD  
SUITE 3  
WEST PALM BEACH, FL 33407

FEI Number: 20-2237476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANDLER, WILLIAM N  
2541 METRO CENTRE BLVD.  
SUITE 1  
WEST PALM BEACH, FL 33407 US

## Name and Address of New Registered Agent:

HANDLER, WILLIAM N  
2540 METRO CENTRE BLVD.  
SUITE 3  
WEST PALM BEACH, FL 33407 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:

01/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HANDLER, WILLIAM N  
Address: 2541 METROCENTRE BLVD SUITE 1  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DT ( ) Delete  
Name: FLOWERS, RENE  
Address: 2541 METROCENTRE BLVD SUITE 1  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DS ( ) Delete  
Name: WEISS, ALLAN  
Address: 2541 METROCENTRE BLVD SUITE 1  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: M (X) Delete  
Name: RULE, LISA A  
Address: 2501 27TH AVENUE, SUITE F-11  
City-St-Zip: VERO BEACH, FL 32965

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HANDLER, WILLIAM N  
Address: 2540 METROCENTRE BLVD SUITE 3  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: DT (X) Change ( ) Addition  
Name: FLOWERS, RENE  
Address: 2540 METROCENTRE BLVD SUITE 3  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: M (X) Change ( ) Addition  
Name: RULE, LISA A  
Address: 2501 27TH AVENUE SUITE F-11  
City-St-Zip: VERO BEACH, F 32966

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: WILLIAM N HANDLER

DP

01/16/2009

Electronic Signature of Signing Officer or Director

Date