2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002327

Apr 29, 2009 Secretary of State

Entity Name: COURTYARDS OF LAKE WORTH AT COLLEGE PARK HOMEOWNERS' ASSOCIATION, INC.

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

2502 N DIXIE HWY

LAKE WORTH, FL 33460 LIS

Current Mailing Address: New Mailing Address:

2889 10TH AVENUE NORTH SUITE 302

LAKE WORTH, FL 33461 US

FEI Number: 20-1683764 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:

ANSAN PROPERTY MANAGEMENT CORY KRAVIT LAW 2889 10TH AVENUE NORTH 902 CLINT MOORE ROAD SUITE 302 SUITE 136 LAKE WORTH, FL 33461 US BOCA RATON, FL 33487 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: CORY KRAVIT 04/29/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition CARVER, ROBIN CARVER, ROBIN Name: Name:

2502 W DIXIE HWY #49 Address: 2502 W DIXIE HWY #49 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete Title: (X) Change () Addition Name: OSOFSKY, KARIN Name: CAHOON, PAM

Address: 2502 N DIXIE HWY, UNIT 35 Address: 2502 N DIXIE HWY, UNIT 35 City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: LAKE WORTH, FL 33460 US

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

MEYER, LINDA Name: KANJIAN, KIRK Name:

2502 N DIXIE HWY, UNIT 43 2502 N DIXIE HWY, UNIT 29 Address: Address: City-St-Zip: LAKE WORTH, FL 33460 US City-St-Zip: LAKE WORTH, FL 33460 US

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: ANDREA BORELL LCAM 04/29/2009