

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002975

FILED
Apr 14, 2009
Secretary of State

Entity Name: BARCELONA TOWNHOUSES ASSOCIATION, INC.

Current Principal Place of Business:

3412 W BAY TO BAY BLVD
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 740
TAMPA, FL 33601

New Mailing Address:

P.O. BOX 18185
TAMPA, FL 33679 US

FEI Number: 56-2465707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JAMES, JUDITH L
325 SOUTH BOULEVARD
TAMPA, FL 33606 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: D () Delete
Name: LAYTON, NEIL
Address: P.O. BOX 740
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: JAMES, JUDITH
Address: P.O. BOX 740
City-St-Zip: TAMPA, FL 33601

Title: D (X) Delete
Name: MATHEWS, KRISTIE L
Address: P.O. BOX 740
City-St-Zip: TAMPA, FL 33601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NEIL LAYTON

D

04/14/2009

Electronic Signature of Signing Officer or Director

Date