2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N05000006048

Entity Name: NORTHLAKE NEIGHBORHOOD COALITION, INC.

Current Principal Place of Business:

2161 PALM BEACH LAKES BLVD
SUITE 450
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

2161 PALM BEACH LAKES BLVD
SUITE 450
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 20-3035922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JACOBS, MARILYN CPA
2161 PALM BEACH LAKES BLVD
SUITE 450
WEST PALM BEACH, FL 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:	JOAN, ALTWATER	
Address:	9180 CYPRESS HOLLOW DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	JOAN, ELIAS	
Address:	1009 DIAMONDHEAD WAY	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	(X) Delete
Name:	MATILDE, LANIER	
Address:	8300 STEEPLECHASE DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	ROY, ALLEM	
Address:	10235 HUNT CLUB LANE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	KEITH, PAULUS	
Address:	10100 HUNT CLUB LANE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	D	( ) Delete
Name:	DONALD, PAULUS	
Address:	112 MONTEREY POINTE DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	

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:	
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: JOAN ALTWATER DIR 05/01/2008
Electronic Signature of Signing Officer or Director — Date