

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002443

FILED
Apr 15, 2009
Secretary of State

Entity Name: DEVONSHIRE PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1990 MAIN STREET
SUITE 700
SARASOTA, FL 34236

New Principal Place of Business:

50 CENTRAL AVE
1702
SARASOTA, FL 34236

Current Mailing Address:

1990 MAIN STREET
SUITE 700
SARASOTA, FL 34236

New Mailing Address:

50 CENTRAL AVE
1702
SARASOTA, FL 34236

FEI Number: 20-4714426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, MARVIN
1990 MAIN STREET
SUITE 700
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

KAPLAN, MARVIN I
50 CENTAL AVE
1702
SARASOTA, FL 34236 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: MARVIN KAPLAN

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAPLAN, MARVIN
Address: 1990 MAIN STREET, SUITE 700
City-St-Zip: SARASOTA, FL 34236

Title: VPST () Delete
Name: DERUIZ, DANE
Address: 1990 MAIN STREET, SUITE 700
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: DERUIZ, DANE
Address: 1990 MAIN STREET, SUITE 700
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete
Name: ARKIN, RICK
Address: 1990 MAIN STREET, SUITE 700
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAPLAN, MARVIN
Address: P.O. BOX 49586
City-St-Zip: SARASOTA, FL 34230

Title: VPST (X) Change () Addition
Name: DERUIZ, DANE
Address: P.O. BOX 2618
City-St-Zip: SARASOTA, FL 34230

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: MARVIN KAPLAN

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date