## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000003371

FILED Apr 29, 2009 Secretary of State

Entity Name: IRON HORSE TOWNHOUSE OWNERS ASSOCIATION, INC.

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

4 LAGUNA STREET, SUITE 201 4 LAGUNA STREET

FORT WALTON BEÁCH, FL 32548 SUITE 201

FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

4 LAGUNA STREET, SUITE 201 4 LAGUNA STREET

FORT WALTON BEÁCH, FL 32548 SUITE 201

FORT WALTON BEACH, FL 32548

FEI Number: 26-0789531 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:

COLBERT, RICHARD M
4 LAGLINA STREET, SLITE 201
4 LAGLINA STREET, SLITE 101

4 LAGUNÁ STREET, SUITE 201 4 LAGUNÁ STREET, SUITE 101 FORT WALTON BEACH, FL 32548 US FORT WALTON BEACH, FL 32548 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: RICHARD M. COLBERT 04/29/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCHWEIZER, JEFFREY L
 Name:

 Address:
 4 LAGUNA STREET, SUITE 201
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32548
 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition Name: SCHWEIZER, WILLIAM T Name: SCHWEIZER, W. TODD Address: 4 LAGUNA STREET, SUITE 201 Address: 4 LAGUNA STREET, SUITE 201 City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

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: JEFFREY L. SCHWEIZER DP 04/29/2009