

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07063

FILED
Apr 06, 2009
Secretary of State

Entity Name: STERLING HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

201 SO. 'J' STREET
LAKE WORTH, FL 33460

New Principal Place of Business:

201 SO. 'J' STREET
LAKE WORTH, FL 33460 US

Current Mailing Address:

P.O. BOX 290
LAKE WORTH, FL 33760

New Mailing Address:

P.O. BOX 290
LAKE WORTH, FL 33760 US

FEI Number: 59-2581180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEKKI, KLAUS
201 S 'J' ST., APT #3
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

KEKKI, KLAUS
201 S 'J' ST.
#3
LAKE WORTH, FL 33460 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:

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: REGIS, JOHNNY
Address: 201 S. J. ST #8
City-St-Zip: LAKE WORTH, FL 33460

Title: PD () Delete
Name: KEKKI, KLAUS
Address: 201 S J ST #3
City-St-Zip: LAKE WORTH, FL 33460

Title: S () Delete
Name: LORD, THERESA
Address: 201 S J ST., #4
City-St-Zip: LAKE WORTH, FL 33460

Title: TD () Delete
Name: PIIRA, JOHN
Address: 511 LAKE AVE
City-St-Zip: LAKE WORTH, FL 33460

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: REGIS, JOHNNY
Address: 201 S. J. ST #8
City-St-Zip: LAKE WORTH, FL 33460 US

Title: PD (X) Change () Addition
Name: KEKKI, KLAUS
Address: 201 S J ST #3
City-St-Zip: LAKE WORTH, FL 33460 US

Title: S (X) Change () Addition
Name: LORD, THERESA
Address: 201 S J ST #4
City-St-Zip: LAKE WORTH, FL 33460 US

Title: TD (X) Change () Addition
Name: LORD, ROBERT
Address: 201 S J ST #4
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: KLAUS KEKKI

PD

04/06/2009

Electronic Signature of Signing Officer or Director

Date