

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001970

FILED
Apr 29, 2009
Secretary of State

Entity Name: PIONEER ROAD PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

625 N. FLAGLER DRIVE
FLOOR 9
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

625 N. FLAGLER DRIVE
FLOOR 9
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KATZ, MARTIN V
625 NORTH FLAGLER DRIVE
9TH FLOOR
WEST PALM BEACH, FL 33401 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: GELSOMINO, COLLEEN
Address: 6517 PIONEER ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: RINKER, RUBY
Address: 6545 PIONEER ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: BARONI, MERKE
Address: 6501 PIONEER ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: KATZ, MARTIN V
Address: 7287 PIONEER ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: GILLIS, DOC
Address: 224 POSSUM PASS
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: D () Delete
Name: GELSOMINO, TERRY
Address: 6517 PIONEER ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

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
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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: MARTIN V. KATZ

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date