2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N08284

Entity Name: THE BARRINGTON AT POINCIANA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3150 VIA POINCIANA
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

3150 VIA POINCIANA
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 59-2850343 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PMS CORP.
3150 VIA POINCIANA
LAKE WORTH,, FL 33467 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: DP ( ) Delete
Name: INGRID, BAEHR
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: DST ( ) Delete
Name: GOTTESMAN, HELEN
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP ( ) Delete
Name: GRAY, MALCOLM
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP ( ) Delete
Name: GIANNOTTI, NICHOLAS
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GIANNOTTI, NICHOLOS
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: DS (X) Change ( ) Addition
Name: GOTTESMAN, HELEN
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change ( ) Addition
Name: ABRAMS, FLORENCE
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Change (X) Addition
Name: GIANNOTTI, MILDRED
Address: 3178 VIA POINCIANA
City-St-Zip: LAKE WORTH, FL 33467

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: NICHOLOA GIANNOTTI DP 04/16/2009

Electronic Signature of Signing Officer or Director — Date