2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10793

FILED May 29, 2009 Secretary of State

Entity Name: NORTHWOODS II AT HUNTERS RUN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	1.O. BHOUSE LANE N BEACH, FL 33436	3700 CLUBHOUSE LA BOYNTON BEACH, F		
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
D/B/A C.M.O. 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436			3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436	
n accordan	:: 59-2689569 FEI Number Applied For() FE nce with s. 607.193(2)(b), F.S., the corporation did not reco d Address of Current Registered Agent:	•	Certificate of Status Desired () of New Registered Agent:	
2500 N. M SUITE 490 30CA RA The above	AY STEVEN ILITARY TRAIL) TON, FL 33431 US e named entity submits this statement for the purpo e of Florida.	se of changing its registere	ed office or registered agent, or both,	
SIGNATU				
JONATO	Electronic Signature of Registered Agent		Date	
		ADDITIONS/CHANG	Date ES TO OFFICERS AND DIRECTORS	
OFFICER Fitle: Name: Address:	Electronic Signature of Registered Agent	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:		
	Electronic Signature of Registered Agent S AND DIRECTORS: SD () Delete SANDS, BOBBI 3700 CLUBHOUSE LANE	Title: Name: Address:	ES TO OFFICERS AND DIRECTORS	
DFFICER itle: lame: ddress: city-St-Zip: itle: lame: ddress: city-St-Zip: itle: lame: ddress:	Electronic Signature of Registered Agent S AND DIRECTORS: SD () Delete SANDS, BOBBI 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 PD () Delete BLOOM, JERROLD 3700 CLUBHOUSE LANE	Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS () Change () Addition	
DFFICER Title: lame: lddress: City-St-Zip: Title: lame: lddress:	Electronic Signature of Registered Agent S AND DIRECTORS: SD () Delete SANDS, BOBBI 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 PD () Delete BLOOM, JERROLD 3700 CLUBHOUSE LANE BOYNTON BEACH, FL 33436 D () Delete FELDMAN, JOEL 3700 CLUB HOUSE LN	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition	

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: BOBBI SANDS SD 05/29/2009