

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12836

FILED
Apr 20, 2009
Secretary of State

Entity Name: ARBOR GLEN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1200 S. ROGERS CIRCLE
STE. 3
BOCA RATON, FL 33487

New Principal Place of Business:

6485 N FEDERAL HIGHWAY
BOCA RATON, FL 33487

Current Mailing Address:

1200 S. ROGERS CIRCLE
STE. 3
BOCA RATON, FL 33487

New Mailing Address:

6485 N FEDERAL HIGHWAY
BOCA RATON, FL 33487

FEI Number: 59-2823323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRST CHOICE MGMT. GROUP INC
KAREN LIPPMAN
1200 SOUTH ROGERS CIRCLE, STE. 3
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

FIRST CHOICE MGMT. GROUP INC
6485 N FEDERAL HIGHWAY
BOCA RATON, FL 33487 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: STEVE LIPPMAN

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: NAVALARY, CARRIE
Address: 5176 ARBOR GLEN CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: P (X) Delete
Name: BLAIR, ANTHONY
Address: 5236 ARBOR GLEN CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: S () Delete
Name: CAROUSSOS, LYN
Address: 7802 AZTEC COURT
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: SCHLESINGER, FREDERICK
Address: 5152 ARBOR GLEN CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: VP () Delete
Name: DADINOSKI, TED
Address: 5078 OWLS COURT
City-St-Zip: LAKE WORTH, FL 33463

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: P (X) Change () Addition
Name: SCHLESINGER, FREDERICK
Address: 5152 ARBOR GLEN CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

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: TED DADINOSKI

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date