

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12836

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** ARBOR GLEN HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1711 WORTHINGTON RD., STE 103  
C/O ALLIED PROPERTY MANAGEMENT GROUP  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC.  
1711 WORTHINGTON ROAD, STE 103  
WEST PALM BEACH, FL 33409 US

**Current Mailing Address:**

1711 WORTHINGTON RD., STE 103  
C/O ALLIED PROPERTY MANAGEMENT GROUP  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC.  
1711 WORTHINGTON ROAD, STE 103  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-2823323

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LIPPMAN, STEVE  
FIRST CHOICE PROPERTY MANAGEMENT GROUP  
3351 NW BOCA RATON BLVD  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

BLUM, KELLY ESQ  
777 S. FLAGLER DRIVE  
WEST TOWER, STE 800  
WEST PALM BEACH, FL 33401 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: KELLY BLUM, ESQ

04/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHLESINGER, FREDERICK  
Address: 1711 WORTHINGTON ROAD, STE 103  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: TD  
Name: GOODMAN, JASON  
Address: 1711 WORTHINGTON ROAD, STE 103  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: SD  
Name: PETERSON, CATHY  
Address: 1711 WORTHINGTON ROAD, STE 103  
City-St-Zip: WEST PALM BEACH, FL 33409 US

I hereby 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 all other like empowered.

SIGNATURE: SCHLESINGER, FREDERICK

PD

04/21/2011

Electronic Signature of Signing Officer or Director

Date