

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24776

FILED
Mar 19, 2009
Secretary of State

Entity Name: WEST PALM HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5114 19 AVE W
BRADENTON, FL 34209 US

New Principal Place of Business:

Current Mailing Address:

5110 19 AVE W
BRADENTON, FL 34209 US

New Mailing Address:

FEI Number: 65-0098787 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, ROBERT L
5210 19 AVE W
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

SCOTT, ROBERT L
5110 19 AVE W
BRADENTON, FL 34209 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:

Electronic Signature of Registered Agent

03/19/2009

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FILIPSKI, JAMES
Address: 5413 19TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: FULGINITI, SAM
Address: 5308 20ST AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: LEAMAN, DON
Address: 5209 19TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: GORDON, DON
Address: 5109 19TH AVE. W.
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: YOUNG, DICK
Address: 5410 19TH AVE WEST
City-St-Zip: BRADENTON, FL 34209

Title: S,D () Delete
Name: SAYLES, MARY L
Address: 1928 54TH ST. W.
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V,D (X) Change () Addition
Name: FILIPSKI, JAMES
Address: 5413 19TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Change () Addition
Name: FULGINITI, SAM
Address: 5308 20TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Change () Addition
Name: LINDER, SANDRA
Address: 5105 19TH AVE W
City-St-Zip: BRADENTON, FL 34209

Title: P,D (X) Change () Addition
Name: KREMPASKY, ELIZABETH
Address: 1920 54TH STREET W
City-St-Zip: BRADENTON, FL 34209

Title: D (X) Change () Addition
Name: MOORE, CLAUDIA
Address: 5114 19TH AVE WEST
City-St-Zip: BRADENTON, FL 34209

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: ROBERT L. SCOTT

Electronic Signature of Signing Officer or Director

D,T

03/19/2009

Date