2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N26490

Entity Name: AMHERST PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6235 SE AMES WAY
HOBE SOUND, FL 33455 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1493
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 65-0403758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, DEBORAH L
759 S. FEDERAL HIGHWAY
SUITE 212
STUART, FL 34994 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: P ( ) Delete
Name: NYBERG, GERRY
Address: 6287 SE AMES WAY
City-St-Zip: HOBE SOUND, FL 33455 US

Title: VP ( ) Delete
Name: COTCHER, DON
Address: 6335 SE AMES WAY
City-St-Zip: HOBE SOUND, FL 33455 US

Title: S ( ) Delete
Name: GEMBERLING, JERILYN
Address: 6311 SE AMES WAY
City-St-Zip: HOBE SOUND, FL 33455 US

Title: T ( ) Delete
Name: DAWLEY, LISA
Address: 6247 SE AMES WAY
City-St-Zip: HOBE SOUND, FL 33455 US

Title: D ( ) Delete
Name: BOHMUELLER, WOODY
Address: 6232 SE AMES WAY
City-St-Zip: HOBE SOUND, FL 33455

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

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: LISA P. DAWLEY - TREASURER TREA 04/06/2009
Electronic Signature of Signing Officer or Director — Date