2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# N33439

Entity Name: WHITTIER OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

Current Mailing Address:

953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071 US

New Mailing Address:

778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 US

FEI Number: 65-0164863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTEGRITY PROPERTY MANAGEMENT, INC.
953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

PALOMBI, GARY
778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442 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: GARY PALOMBI 04/09/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PERI, DOMINICK
Address: 6685 NW 75 PLACE
City-St-Zip: PARKLAND, FL 33067

Title: V ( ) Delete
Name: ST. AUBIN, CAROL
Address: 7350 NW 68 WAY
City-St-Zip: PARKLAND, FL 33067

Title: T ( ) Delete
Name: HELLER, MELISSA
Address: 6810 NW 75 CT
City-St-Zip: PARKLAND, FL 33067

Title: S ( ) Delete
Name: LEWIS, PATRICIA
Address: 6745 NW 75 PLACE
City-St-Zip: PARKLAND, FL 33067

Title: D ( ) Delete
Name: KENT, RON
Address: 6765 NW 74 CT
City-St-Zip: PARKLAND, FL 33067

Title: D ( ) Delete
Name: BURGER, KEVIN
Address: 6840 NW 75 CT
City-St-Zip: PARKLAND, FL 33067

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: S (X) Change ( ) Addition
Name: LEVIS, PATRICIA
Address: 6745 NW 75 PLACE
City-St-Zip: PARKLAND, FL 33067

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: GARY PALOMBI RA 04/09/2009
Electronic Signature of Signing Officer or Director Date