

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46279

FILED
Apr 25, 2009
Secretary of State

Entity Name: COMMUNITY PARTNERS DEVELOPMENT CORPORATION

Current Principal Place of Business:

1963 10TH AVE NORTH
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1963 10TH AVE NORTH
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-0299888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREITER, KURT
1963 10TH AVE NORTH
LAKE WORTH, FL 33461 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: FREITER, KURT
Address: 1963 10TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: CEO () Delete
Name: FREITER, KURT
Address: 1963 10TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: VPD () Delete
Name: DARLING, JOHN
Address: 7391 VENTIAN WAY
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SCFO () Delete
Name: MAIER, ANDY
Address: 1963 10TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: AUSLANDER, JEFF
Address: 1963 10TH AVE NORTH
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: BAHR, RALF
Address: 3101 SPANISH TRAIL
City-St-Zip: DELRAY BEACH, FL 33406

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
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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: KURT FREITER

PRES

04/25/2009

Electronic Signature of Signing Officer or Director

Date