

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50033

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: PORT OF CALL TOWNHOUSES HOME OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

143 AREGOOD LANE  
D-1  
ISLAMORADA, FL 33036

## New Principal Place of Business:

## Current Mailing Address:

143 AREGOOD LANE  
D-1  
ISLAMORADA, FL 33036

## New Mailing Address:

FEI Number: 65-0500787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KNICKERBOCKER, WILLIAM  
143 AREGOOD LANE  
D-1  
ISLAMORADA, FL 33036 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: MAXWELL, WANE  
Address: 4796 SOMMERVILLE RD  
City-St-Zip: OXFORD, OH 45056

Title: S ( ) Delete  
Name: KNICKERBOCKER, BILL  
Address: 143 AREGOOD LANE D-1  
City-St-Zip: ISLAMORADA, FL 33036

Title: D ( ) Delete  
Name: SWIFT, J P  
Address: 379 E 21 STREET  
City-St-Zip: COSTA MESA, CA 92627

Title: D ( ) Delete  
Name: SCHRIBER, RICHARD  
Address: 3145 JACKSON AVE  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: GONZALES, ENRIQUE  
Address: 1521 ALEGRINO AVE  
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete  
Name: SCHUBBE, DEBBIE  
Address: 2817 BITTER ROOT CT  
City-St-Zip: PLANO, TX 75026

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MAXWELL, WANE  
Address: 4796 SOMMERVILLE RD  
City-St-Zip: OXFORD, OH 45056

Title: VP (X) Change ( ) Addition  
Name: KNICKERBOCKER, BILL  
Address: 143 AREGOOD LANE D-1  
City-St-Zip: ISLAMORADA, FL 33036

Title: S (X) Change ( ) Addition  
Name: LEO, ED  
Address: 126 ROUND HILL RD  
City-St-Zip: KENNETT SQUARE, PA 19348

Title: P (X) Change ( ) Addition  
Name: SCHRIBER, RICHARD  
Address: 3145 JACKSON AVE  
City-St-Zip: MIAMI, FL 33133

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: WILLIAM KNICKERBOCKER

VP

02/26/2009

Electronic Signature of Signing Officer or Director

Date