

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50033

FILED
Feb 24, 2010
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: D
Name: MAXWELL, WANE
Address: 4796 SOMMERVILLE RD
City-St-Zip: OXFORD, OH 45056

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

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

Title: P
Name: SCHRIBER, RICHARD
Address: 3145 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

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

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

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM KNICKERBOCKER

TREA

02/24/2010

Electronic Signature of Signing Officer or Director

Date