2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N94000001663

Entity Name: YARDLEY ESTATES AT CORAL SPRINGS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4750 W. COMMERCIAL BLVD
TAMARAC, FL 33319 US

New Principal Place of Business:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

Current Mailing Address:

4750 W. COMMERCIAL BLVD
TAMARAC, FL 33319 US

New Mailing Address:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

FEI Number: 65-0561532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOUNDATION PROPERTY SERVICES
4750 W. COMMERCIAL BLVD
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

INTEGRITY PROPERTY MGT.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 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: CINDY WHITTLE 04/16/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: D'AMATO, DEBI
Address: 10357 NW 53RD CT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP ( ) Delete
Name: STOUT, DEBBY
Address: 10206 NW 53RD CT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S ( ) Delete
Name: HECKER, SHARON
Address: 10327 NW 53RD CT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T ( ) Delete
Name: STRAVINO, ANNETTE
Address: 10360 NW 52ND STREET
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete
Name: FRITTS, MARY KAY
Address: 10289 NW 52ND STREET
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete
Name: LAROSA, BETH
Address: 5350 NW 102ND AVE
City-St-Zip: CORAL SPRINGS, FL 33076

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:

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: DEBI D'AMATO P 04/16/2009
Electronic Signature of Signing Officer or Director Date