

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003347

FILED
Mar 29, 2011
Secretary of State

Entity Name: THE ARBORS VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

CAMS
314 NE 3RD ST
BOYNTON BEACH, FL 33435

New Principal Place of Business:

CAMS
1037 STATE ROAD 7 SUITE 302
WELLINGTON, FL 33414

Current Mailing Address:

P.O. 1562
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 65-0569420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYDZEWSKI, ROBERT G JR, ESQ
LAW OFFICES OF CORNETT, GOOGE & ASSOCIATES
401 SE OSCEOLA ST FIRST FLOOR
STUART, FL 34994 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
Name: TOWERS, PAT
Address: PO BOX 587
City-St-Zip: HOBE SOUND, FL 33475

Title: T
Name: BOWEN-SMITH, FRED
Address: 5754 SE FOREST GLADE TRAIL
City-St-Zip: HOBE SOUND, FL 33475

Title: D
Name: GARRETT, JERRY
Address: 5391 SE ACADIA TERRACE
City-St-Zip: HOBE SOUND, FL 33475

Title: VP
Name: TOBIN, JOHN
Address: 7762 SE MAMMOTH DRIVE
City-St-Zip: HOBE SOUND, FL 33475

Title: S/T
Name: DODDATO-ZOLLO, ANNE
Address: 5439 ACADIA TERRACE
City-St-Zip: HOBE SOUND, FL 33475

Title: D
Name: D'ANDREA, GERALD
Address: 7924 SE SEQUOIA DR
City-St-Zip: HOBE SOUND, FL 33475

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: PAT TOWERS

P

03/29/2011

Electronic Signature of Signing Officer or Director

Date