

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000565

FILED
Feb 12, 2009
Secretary of State

Entity Name: COBBLESTONE WALK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10152 ROYAL PLAM BLVD
CORAL SPRINGS, FL 33075 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8406
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: 65-0601659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR, BROUGH & CHADROW, P.A.
WESTSIDE CORPORATE CENTER
150 SOUTH PINE ISLAND RD., STE 540
PLANTATION, FL 333242669 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: PRES () Delete
Name: DOONAN, PATRICIA E MS
Address: 10152 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: PRIETO/TORRIES, CINDY MRS
Address: 10188 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TRES () Delete
Name: BEYERLEIN, BEVERLY MS
Address: 10198 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: FAJKIS, EUGENIA MS
Address: 10154 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065

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: EUGENIA FAJKIS

M

02/12/2009

Electronic Signature of Signing Officer or Director

Date