

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000565

FILED  
Feb 18, 2010  
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  
**Name:** DOONAN, PATRICIA E MS  
**Address:** 10152 ROYAL PALM BLVD.  
**City-St-Zip:** CORAL SPRINGS, FL 33065

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

**Title:** TRES  
**Name:** FAJKIS, EUGENIA MS  
**Address:** 10154 ROYAL PALM BLVD.  
**City-St-Zip:** CORAL SPRINGS, FL 33065

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:** EUGENIA FAJKIS

TRES

02/18/2010

Electronic Signature of Signing Officer or Director

Date