

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003634

FILED
Apr 29, 2009
Secretary of State

Entity Name: TRI COUNTY COMMUNITIES ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 17435
W PALM BEACH, FL 33416

New Principal Place of Business:

1601 FORUM PLACE
SUITE 701
W PALM BEACH, FL 33401

Current Mailing Address:

1601 FORUM PLACE #701
WEST PALM BEACH, FL 33401

New Mailing Address:

P.O. BOX 17435
WEST PALM BEACH, FL 33416

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST. JOHN, CORE, & LEMME., P.A.
1601 FORUM PLACE
#701
WEST PALM BEACH, FL 33401 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 () Delete
Name: BURNS, PAMELA
Address: 112 STIRRUP LANE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VP () Delete
Name: HART, JAMES C
Address: 114 MONTEREY WAY
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T () Delete
Name: O'DONNELL, EILEEN
Address: 2381 SUNSET AVE.
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: UPHOFF, BILL
Address: 825 CENTER STREET
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: DAVIS, JOHN
Address: 239 BRIER CIRCLE
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: ST. JOHN, DAVID
Address: 1601 FORUM PLACE #701
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BLUM, EDWARD
Address: 721 LORI DR.
City-St-Zip: LAKE WORTH, FL 33461

Title: P/P (X) Change () Addition
Name: HART, JAMES C
Address: 114 MONTEREY WAY
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S/T (X) Change () Addition
Name: O'DONNELL, EILEEN
Address: 2381 SUNSET AVE.
City-St-Zip: LAKE WORTH, FL 33461

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: DAVID ST. JOHN

D

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date