

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005933

FILED
Mar 11, 2009
Secretary of State

Entity Name: ABACOA PROPERTY OWNERS' ASSEMBLY, INC.

Current Principal Place of Business:

1200 UNIVERSITY BLVD.
SUITE #102
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

1200 UNIVERSITY BLVD.
SUITE #102
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-0729333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDS, GARY D
4400 PGA BLVD
STE 900
PALM BEACH GARDENS, FL 33410 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: LIPPMAN, PETER
Address: 221 BARBADOS DR
City-St-Zip: JUPITER, FL 33458

Title: VP () Delete
Name: HEDGE, SCOTT
Address: 138 BARBADOS DR
City-St-Zip: JUPITER, FL 33458

Title: T () Delete
Name: SILVERMAN, HARVEY
Address: 192 HONEYSUCKLE DR
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: OCONNELL, JOE
Address: 315 SAN REMO DR
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: RENDINA, RICHARD
Address: 115 VALENCIA BLVD
City-St-Zip: JUPITER, FL 33458

Title: D () Delete
Name: CARRILLO, DAVID
Address: 126 SEGOVIA WAY
City-St-Zip: JUPITER, FL 33458

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: D (X) Change () Addition
Name: CICH, BRIAN
Address: 661 UNIVERSITY BLVD, SUITE 200
City-St-Zip: JUPITER, FL 33458

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: HARVEY SILVERMAN

T

03/11/2009

Electronic Signature of Signing Officer or Director

Date