

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001804

FILED
Mar 26, 2009
Secretary of State

Entity Name: HYPOLUXO HARBOR CLUB HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

ASSOCIATED PROPERTY MGMT.
1928 LAKE WORTH RD.
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 65-0825076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPLAN, LOUIS ESQ.
SACHS & SAX
301 YMATO ROAD, SUITE 4150
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

CAPLAN, LOUIS ESQ.
SACHS, SAX & CAPLAN, P.A.
6111 BROKEN SOUND PKWY N.W. #200
BOCA RATON, FL 33487 US

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: LOUIS CAPLAN, ESQ

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOUVIER, JOANNE
Address: 4049 MISSION BELL DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD () Delete
Name: ALEXANDER, NANCY
Address: 4106 MOCKING BIRD DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: SD () Delete
Name: FINGER, ELLEN
Address: 2104 SW PARK DR.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: TD () Delete
Name: PECK, LORRAINE
Address: 11 S LOAFING ST
City-St-Zip: HYPOLUXO, FL 33462

Title: D () Delete
Name: GERSTNER, TOM
Address: 811 LAKESIDE PL.
City-St-Zip: LAKE WORTH, FL 33462

Title: D () Delete
Name: MAIN, HAROLD
Address: 13 N LOAFING ST
City-St-Zip: HYPOLUXO, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOUVIER, JOANNE P
Address: 4049 MISSION BELL DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: V (X) Change () Addition
Name: ALEXANDER, NANCY V
Address: 4106 MOCKINGBIRD DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: S (X) Change () Addition
Name: FINER, ELLEN S
Address: 2104 SW PARK DR.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T (X) Change () Addition
Name: PECK, LORRAINE T
Address: 11 S LOAFING ST
City-St-Zip: HYPOLUXO, FL 33462

Title: D (X) Change () Addition
Name: MAIN, HAROLD D
Address: 6005 HYNSON RD
City-St-Zip: ROCKHALL, MD 21661

Title: D (X) Change () Addition
Name: PALERMO, FRED D
Address: 217 BAY RD
City-St-Zip: OCEAN CITY, NJ 08226

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: JOHN MATH, APM

AGT

03/26/2009

Electronic Signature of Signing Officer or Director

Date