2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N99000002635

Entity Name: NORTHWOOD GARDENS NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

424 41ST STREET
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

424 41ST STREET
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 65-1017032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAMER, JOHN
424 41ST ST
WEST PALM BEACH, FL 33407 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:	D	( ) Delete
Name:	CRAMER, JOHN	
Address:	424 41ST STREET	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	VP	( ) Delete
Name:	NAQUIN, DARRELL	
Address:	PO 8116 (424 41 STREET)	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	D	( ) Delete
Name:	BRENAHAN, VIVEN	
Address:	424 42ND ST	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	T	( ) Delete
Name:	RICHTER, COLLEEN	
Address:	508 45TH ST	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	S	( ) Delete
Name:	ROSZENAS, JACKIE	
Address:	407 43RD ST	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	D	( ) Delete
Name:	VAREY, SUE	
Address:	427 41ST STREET	
City-St-Zip:	WEST PALM BEACH, FL 33407	

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:	( ) 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: JOHN M. CRAMER DIR 01/16/2009

Electronic Signature of Signing Officer or Director — Date