

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002635

FILED  
Feb 15, 2012  
Secretary of State

**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  
Name: CRAMER, JOHN  
Address: 424 41ST STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP  
Name: NAQUIN, DARRELL  
Address: PO 8116 (424 41 STREET)  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: P  
Name: MULLEN, MICHAEL  
Address: 519 40TH ST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T  
Name: RICHTER, COLLEEN  
Address: 508 45TH ST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S  
Name: ROSZENAS, JACKIE  
Address: 407 43RD ST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D  
Name: VAREY, SUE  
Address: 427 41ST STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

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: JOHN M. CRAMER

D

02/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date