2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003283

FILED Apr 16, 2009 Secretary of State

Entity Name: TOWNHOMES OF WEST PARK VILLAGE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3974 TAMPA ROAD 4131 GUNN HWY TAMPA, FL 33618

OLDSMAR, FL 34677

New Mailing Address: Current Mailing Address:

GREENACRE PROPERTIES, INC. 4131 GUNN HWY 4131 GUNN HWY TAMPA, FL 33618

TAMPA, FL 33618

FEI Number: 59-3657517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEZER, STEVE ESQ 220 S FRANKLIN ST TAMPA, FL 33601

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete DP (X) Change () Addition

NIEMIS, MICHAEL NIEMIS, MICHAEL Name: Name: PO BOX 940 Address: 4131 GUNN HWY Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: TAMPA, FL 33618

Title: SD Title: (X) Change () Addition () Delete HARTE, KAREN Name: HARTE, KAREN Name:

Address: 10113 HAYFIELD WAY Address: 4131 GUNN HWY City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33618

Title: () Delete Title: (X) Change () Addition

RODRIQUEZ, MARY RODRIQUEZ, MARY Name: Name: Address: 10022 NEW PARKE RD Address: 4131 GUNN HWY City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33618

(X) Change () Addition Title: () Delete Title: D

Name: REEDER, SAM Name: REEDER, SAM 10039 NEW PARKE ROAD Address: Address: 4131 GUNN HWY City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33618

Title: VPD () Delete Title: (X) Change () Addition

PLANETA, CHRISTOPHER MCQUINN, MARY Name: Name: 9624 WEST PARK VILLAGE DRIVE 4131 GUNN HWY Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33618

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: MICHAEL NIEMIS PD 04/16/2009