

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004310

FILED
Apr 03, 2009
Secretary of State

Entity Name: CORSICA PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

GRS MANAGEMENT ASSOCIATES, INC
3900 WOODLAKE BLVD #309
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

GRS MANAGEMENT ASSOCIATES, INC
3900 WOODLAKE BLVD #309
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-0984886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAY, LEVINE S P.A.
3300 PGA BLVD STE 530
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: VP2 () Delete
Name: CHESHES, ROBERT
Address: 8094 HONEGA DR.
City-St-Zip: BOYNTON BEACH, FL 33472

Title: SD () Delete
Name: FRIEDMAN, JOYCE
Address: 8167 DUOMO CIR
City-St-Zip: BOYNTON BEACH, FL 33472

Title: SD () Delete
Name: BERMAN, LINDA
Address: 8183 FLORENZA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: PD () Delete
Name: HOFFMAN, MICHAEL
Address: 8067 DUOMO CIR
City-St-Zip: BOYNTON BEACH, FL 33472

Title: T () Delete
Name: TURRET, HY
Address: 8074 DUOMO CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP1 (X) Change () Addition
Name: CHESHES, ROBERT
Address: 8094 FLORENZA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: SD (X) Change () Addition
Name: BAIER, JUDY
Address: 8335 DUOMO CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: TD (X) Change () Addition
Name: HOLTZMAN, ARTHUR
Address: 8087 DUOMO CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VPD (X) Change () Addition
Name: MANTIN, HY
Address: 8322 DUOMO CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

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 HOFFMAN

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date