

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005685

FILED
Apr 20, 2009
Secretary of State

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

Current Principal Place of Business:

4131 GUNN HWY.
TAMPA, FL 33624

New Principal Place of Business:

4131 GUNN HWY.
TAMPA, FL 33618

Current Mailing Address:

4131 GUNN HWY.
TAMPA, FL 33624

New Mailing Address:

4131 GUNN HWY.
TAMPA, FL 33618

FEI Number: 59-3657544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEZER, STEVEN
BUSH, ROSS, GARDNER & RUDY
220 S FRANKLIN STREET
TAMPA, FL 33602 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: VPD () Delete
Name: WITONSKI, MARIA
Address: 10017 TATE LN
City-St-Zip: TAMPA, FL 33626

Title: PD () Delete
Name: SWEARINGEN, HUNTER
Address: 10024 TATE LN
City-St-Zip: TAMPA, FL 33626

Title: TD () Delete
Name: SOUZA, KEN
Address: 9807 WEST PARKE VILLAGE DR
City-St-Zip: TAMPA, FL 33626

Title: SD () Delete
Name: HANLEY, CHIP
Address: 10022 TATE LN
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: RICHARDS, CHUCK
Address: 9536 WEST PARKE VILLAGE DR
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WITONSKI, MARIA
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: PD (X) Change () Addition
Name: SWEARINGEN, HUNTER
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: TD (X) Change () Addition
Name: SOUZA, KEN
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: S (X) Change () Addition
Name: HANLEY, CHIP
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change () Addition
Name: RICHARDS, CHUCK
Address: 4131 GUNN HWY
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: MARIA WITONSKI

VP

04/20/2009

Electronic Signature of Signing Officer or Director

Date