

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007677

FILED
Apr 23, 2009
Secretary of State

Entity Name: CASTLE PINES TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

2160 N.W. RESERVE PARK TRACE
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

2140 N.W. RESERVE PARK TRACE
PORT ST. LUCIE, FL 34986

Current Mailing Address:

21045 COMMERCIAL TRIAL
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 65-0971854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

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: WILLIAM K. ISAACSON

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SAULNIER, ROBERT
Address: 9322 WENTWORTH LANE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: P () Delete
Name: SCHUM, TIM
Address: 9219 WENTWORTH LANE
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: D () Delete
Name: PANTANO, JACK
Address: 9334 WENTWORTH CUP WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VP (X) Delete
Name: MINER, ROBERT
Address: 9304 WORD CUP WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: S (X) Delete
Name: SMITH, ART
Address: 7325 WORD CUP WAY
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: MORRIS, C. STEDMAN
Address: 9341 WORLD CUP WAY
City-St-Zip: PORT ST. LUCIE, FL 34986

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: C. STEDMAN MORRIS

VP

04/23/2009

Electronic Signature of Signing Officer or Director

Date