

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045436

FILED
Apr 16, 2009
Secretary of State

Entity Name: TOR-PALMS TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

3217-3225 NE 13TH STREET
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

3225 NE 13TH STREET
#204
POMPANO BEACH, FL 33062

New Mailing Address:

3225 NE 13TH STREET
#201
POMPANO BEACH, FL 33062

FEI Number: 65-1104135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGEL, LARRY
800 CYPRESS CREEK RD.
470
FT LAUDERDALE, FL 33309 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOLDMAN, SHELLEY
Address: 3225 NE 13TH ST, #202
City-St-Zip: POMPANO BEACH, FL 33062

Title: V () Delete
Name: JOZWIAK, JESSIE
Address: 3217 NE 13 STREET #101
City-St-Zip: POMPANO BEACH, FL 33062

Title: S () Delete
Name: PACIA, STEPHANIE
Address: 3225 N.E. 13 STREET #204
City-St-Zip: POMPANO BEACH, FL 33062

Title: T () Delete
Name: LIUTERMOZA, PATRICIA
Address: 3225 N.E.E 13 STREET #205
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PACIA, STEPHANIE
Address: 3225 NE 13TH ST, #204
City-St-Zip: POMPANO BEACH, FL 33062

Title: V (X) Change () Addition
Name: GORNISIEWICZ, OLAF
Address: 3217 NE 13 STREET #103
City-St-Zip: POMPANO BEACH, FL 33062

Title: S (X) Change () Addition
Name: MC DONALD, FRAN
Address: 3225 N.E. 13 STREET #102
City-St-Zip: POMPANO BEACH, FL 33062

Title: T (X) Change () Addition
Name: MANVILLE, WILLIAM
Address: 3225 N.E.E 13 STREET #201
City-St-Zip: POMPANO BEACH, FL 33062

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM MANVILLE

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04/16/2009

Electronic Signature of Signing Officer or Director

Date