

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712367

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: THE BUILDING ASSOCIATION OF WINTER HAVEN, INC.

**Current Principal Place of Business:**

3308 AVE W. NW  
P.O. BOX 2088  
WINTER HAVEN, FL 33883

**New Principal Place of Business:**

3308 AVE W. NW  
WINTER HAVEN, FL 33883

**Current Mailing Address:**

3308 AVE W. NW  
P.O. BOX 2088  
WINTER HAVEN, FL 33883

**New Mailing Address:**

FEI Number: 59-2347604      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NORTON, THOMAS L  
3991 LK NED CIR  
WINTER HAVEN, FL 33884      US

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

NORTON, THOMAS L  
505 WILLET CR.  
AUBURNDALE, FL 33823      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: \_\_\_\_\_ Date: 04/21/2009  
Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: LANGBEIN, CHARLES E JR  
Address: 120 PARKSIDE DR S E  
City-St-Zip: WINTER HAVEN, FL

Title: PD ( ) Delete  
Name: DIAZ, RALPH  
Address: 36 LAKE LINK CIR.  
City-St-Zip: WINTER HAVEN, FL

Title: VD ( ) Delete  
Name: CRANSTON, MONTCAUM  
Address: 150 ORANGE BLOSSOM LN. S.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD ( ) Delete  
Name: NORTON, THOMAS L.  
Address: 3991 LK NE CIR  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VD (X) Change ( ) Addition  
Name: CRANSTON, MONTCAUM  
Address: 5221 ORCHID TREE LN.  
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD (X) Change ( ) Addition  
Name: NORTON, THOMAS L.  
Address: 505 WILLET CR.  
City-St-Zip: AUBURNDALE, FL 33823

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: CHARLES E. LANGBEIN, JR.      TR      Date: 04/21/2009  
Electronic Signature of Signing Officer or Director