

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738330

FILED  
Mar 17, 2008  
Secretary of State

Entity Name: CUMBERLAND CIRCLE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

1600 NW 19TH CIRCLE  
GAINESVILLE, FL 32605 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1 PL  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

FEI Number: 59-1883157      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAUSAMAN, JEFFREY D  
C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1 PL  
GAINESVILLE, FL 32607 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: PD ( ) Delete  
Name: DUFFIELD, KEN  
Address: 1603 NW 19 CIR  
City-St-Zip: GAINESVILLE, FL 32605

Title: VD ( ) Delete  
Name: MOSLEY, BOB  
Address: 1615 NW 19 CIR  
City-St-Zip: GAINESVILLE, FL 32605

Title: SD ( ) Delete  
Name: CANON, KATHERINE  
Address: 1649 NW 19 CIR  
City-St-Zip: GAINESVILLE, FL 32605

Title: TD ( ) Delete  
Name: SUMMERLIN, MARY ANNE  
Address: 1605 NW 19TH CIRCLE  
City-St-Zip: GAINESVILLE, FL 326054028

Title: D ( ) Delete  
Name: HAMILTON, JOHN  
Address: 1641 NW 19TH CIR  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: ELLIS, PATRICIA  
Address: 1676 NW 19 CIR  
City-St-Zip: GAINESVILLE, FL 32605

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

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

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: BOSTICK, RHESA  
Address: 1594 NW 19 CIR  
City-St-Zip: GAINESVILLE, FL 32605

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: KEN DUFFIELD

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

03/17/2008

\_\_\_\_\_  
Date