

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741326

FILED  
Feb 21, 2009  
Secretary of State

**Entity Name:** SPANISH LAKES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1 SILVER OAK DR  
PORT ST. LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7891  
PORT SAINT LUCIE, FL 34985 US

**New Mailing Address:**

**FEI Number:** 59-1805294

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUVERGER, ARMAND  
4 EL GRECO ST  
PORT SAINT LUCIE, FL 34952 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: HEILAND, GEORGE  
Address: 66 GOLF DR  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VPD ( ) Delete  
Name: DICOCCO, LOUIS  
Address: 9 REFORM LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: SD ( ) Delete  
Name: MEYER, DONNA  
Address: 15 CORTEZ LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D ( ) Delete  
Name: CRAIQUE, KEN  
Address: 58 DEL PRADO  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D ( ) Delete  
Name: DIVERGER, ARMAND  
Address: 4 EL GRECO ST.  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD ( ) Delete  
Name: KENNEDY, ROBERT  
Address: 57 MEDITERRANEAN E  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

Title: PD (X) Change ( ) Addition  
Name: DICOCCO, LOUIS  
Address: 9 REFORMA LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VPD (X) Change ( ) Addition  
Name: NULTY, JIM  
Address: 11 MEDITERANEAN E  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD (X) Change ( ) Addition  
Name: JEZ, ROSEMARY  
Address: 5 CORDOVA LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

Title: D (X) Change ( ) Addition  
Name: RINALDI, ANGELO  
Address: 7 REFORMA LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D (X) Change ( ) Addition  
Name: PARR, ROBERT  
Address: 18 MADRID LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: ROSEMARY JEZ

TD

02/21/2009

Electronic Signature of Signing Officer or Director

Date