

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752720

FILED
Jan 30, 2009
Secretary of State

Entity Name: COUNTRY WALK ESTATE HOMES ASSOCIATION, INC.

Current Principal Place of Business:

14601 COUNTRY WALK
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

P.O BOX 924176
MIAMI, FL 33092

New Mailing Address:

FEI Number: 59-2025974 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOYCE GOODMAN - GUENTHER, P.A.
10723 SW 104 STREET
MIAMI, FL 33176 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: S () Delete
Name: WADDELL, DEBBIE
Address: 14721 SW 148 AVE
City-St-Zip: MIAMI, FL 33196

Title: T () Delete
Name: JONES, DAVID
Address: 14505 SW 141 PL.
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: JANOSKY, MICHAEL
Address: 14815 SW 153 ST
City-St-Zip: MIAMI, FL 33196

Title: P () Delete
Name: GERSHEN, LARRY
Address: 14601 COUNTRY WALK DR
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: KOTKIN, SID
Address: 15025 SW 148 STREET
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: HEINZEN, KEN
Address: 14643 SW 141 CT
City-St-Zip: MIAMI, FL 33196

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: () 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: LARRY GERSHEN

P

01/30/2009

Electronic Signature of Signing Officer or Director

_____ Date