

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005155

FILED
Mar 05, 2008
Secretary of State

Entity Name: VIRGINIA CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 59-3534571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: D () Delete
Name: TRETtau, JANET
Address: 917 MICHELE CIRCLE
City-St-Zip: DUNEDIN, FL 34698

Title: SD () Delete
Name: WAHL, JIM
Address: 1162 DIXON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: PD () Delete
Name: COYNE, JOHN
Address: 1161 DIXON COURT
City-St-Zip: DUNEDIN, FL 34698

Title: VPD () Delete
Name: GROTH, ED
Address: 1162 SARAH CT.
City-St-Zip: DUNEDIN, FL 34698

Title: TD () Delete
Name: COCHRAN, MARILYN
Address: 900 MICHELE CIRCLE
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: HOFFMAN, ROBERT
Address: 824 PEGGY RAY DRIVE
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: GORSHE, CINDY
Address: 867 MICHELE CIR.
City-St-Zip: DUNEDIN, FL 34698

Title: PD (X) Change () Addition
Name: COYNE, JOHN
Address: 1161 DIXON COURT
City-St-Zip: DUNEDIN, FL 34698

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

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

Title: D (X) Change () Addition
Name: MONTI, STANLEY
Address: 1108 HALEY LANE
City-St-Zip: DUNEDIN, FL 34698

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: JOHN COYNE

PRES

03/05/2008

Electronic Signature of Signing Officer or Director

_____ Date