

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000310

FILED
Mar 20, 2009
Secretary of State

Entity Name: CHEROKEE PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

CRAIG HICKERSON
1723 SOUTH DRIVE
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

AMY L. SERGENT
711 N. WASHINGTON BLVD.
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 35-3190871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERGENT, AMY
711 N. WASHINGTON BLVD.
SARASOTA, FL 34236 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: HICKERSON, CRAIG
Address: 1723 SOUTH DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: VD () Delete
Name: KOSKO, MAURICE
Address: 1774 CHEROKEE DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: VD () Delete
Name: SERGENT, AMY
Address: 1733 SOUTH DR
City-St-Zip: SARASOTA, FL 34239

Title: SD () Delete
Name: VEGA, DANA
Address: 1762 NORTH DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: TD () Delete
Name: KOSKO, SUSAN
Address: 1774 CHEROKEE DR
City-St-Zip: SARASOTA, FL 34239

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: SCHOONOVER, KIP
Address: 1723 SOUTH DR
City-St-Zip: SARASOTA, FL 34239

Title: SD (X) Change () Addition
Name: SERGENT, AMY
Address: 1733 SOUTH DRIVE
City-St-Zip: SARASOTA, FL 34239

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: AMY L. SERGENT

SD

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date