

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90070 010 ****61.25



DOCUMENT # N02000005805
 1. Entity Name
 REFLECTIONS WEST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business
 3216 MERLOT DR
 LAKELAND, FL 33811-1810

Mailing Address
 P.O. BOX 6107
 LAKELAND, FL 33807



2. Principal Place of Business - No P.O. Box #
 121 Raintree Ct
 Suite, Apt. #, etc.

3. Mailing Address
 PO Box 95
 Suite, Apt. #, etc.

02032008 Chg-NP CR2E037 (12/06)

City & State
 Auburndale FL

City & State
 Auburndale FL

Zip
 33823

Country

Zip
 33823

Country

4. FEI Number
 56-2297232

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 WHITT, JERROLD R
 3216 MERLOT DR
 LAKELAND, FL 33811

7. Name and Address of New Registered Agent
 Name David L Burman
 Street Address (P.O. Box Number is Not Acceptable)
 121 Raintree Ct
 City Auburndale FL Zip Code 33823

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *David L Burman* DATE 2-4-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PRES	<input type="checkbox"/> Delete
NAME	WHITT, JERROLD R	
STREET ADDRESS	3216 MERLOT DR	
CITY-ST-ZIP	LAKELAND, FL 33811	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SINBACK, PETRITA	
STREET ADDRESS	3353 MERLOT DR	
CITY-ST-ZIP	LAKELAND, FL 33811	
TITLE	SEC	<input type="checkbox"/> Delete
NAME	DAWN, WILD	
STREET ADDRESS	6618 MADEIRA AVE	
CITY-ST-ZIP	LAKELAND, FL 33811	
TITLE	T	<input type="checkbox"/> Delete
NAME	PHILLIPS, KATERINA	
STREET ADDRESS	3264 SANOMA DR.	
CITY-ST-ZIP	LAKELAND, FL 33811	
TITLE	D	<input type="checkbox"/> Delete
NAME	HALL, RONALD	
STREET ADDRESS	6686 BORDEAUX BLVD	
CITY-ST-ZIP	LAKELAND, FL 33811	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jerrold R Whitt* DATE _____ DAYTIME PHONE # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR