2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N02000007104

Entity Name: ARBOR THICKET HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1400 THICKET LANE
SARASOTA, FL 34240

New Principal Place of Business:

1000 THICKET LANE
SARASOTA, FL 34240

Current Mailing Address:

1400 THICKET LANE
SARASOTA, FL 34240

New Mailing Address:

1631 JEWEL DRIVE
SARASOTA, FL 34240

FEI Number: 81-0573016 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOPE, EDWIN G
1400 THICKET LANE
SARASOTA, FL 34240 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: TOPE, EDWIN G
Address: 1400 THICKET LANE
City-St-Zip: SARASOTA, FL 34240

Title: T ( ) Delete
Name: TOPE, RENEE S
Address: 1400 THICKET LANE
City-St-Zip: SARASOTA, FL 34240

Title: T (X) Delete
Name: BARRETT, JEFFERY
Address: 1110 NOGALES BEND
City-St-Zip: RICHMOND, TX 77469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DELOACH, ANTHONY
Address: 1631 JEWEL DR
City-St-Zip: SARASOTA, FL 34240

Title: T (X) Change ( ) Addition
Name: DELOACH, LAURIE J
Address: 1631 JEWEL DRIVE
City-St-Zip: SARASOTA, FL 34240

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: ANTHONY DELOACH D 04/27/2009

Electronic Signature of Signing Officer or Director — Date