

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001899

FILED
Apr 20, 2009
Secretary of State

Entity Name: ECON WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 677307
ORLANDO, FL 328677307

New Principal Place of Business:

4962 NORTH PALM AVENUE
WINTER PARK, FL 32792

Current Mailing Address:

P.O. BOX 677307
ORLANDO, FL 328677307

New Mailing Address:

FEI Number: 20-0303707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRASCA, JOSEPH
C/O PREFERRED COMMUNITY MANAGEMENT
4962 N. PALM AVENUE
WINTER PARK, FL 32792 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: WARD, JESSE
Address: 14013 ECON WOODS LANE
City-St-Zip: ORLANDO, FL 32826

Title: TD () Delete
Name: FORTY, ALEX
Address: 14308 ECON WOODS LN
City-St-Zip: ORLANDO, FL 32826

Title: VPD () Delete
Name: RODRIGUES, SUSANA
Address: 13824 ECON WOODS LANE
City-St-Zip: ORLANDO, FL 32826

Title: D () Delete
Name: GRAU, DAVID
Address: 14132 ECON WOODS LANE
City-St-Zip: ORLANDO, FL 32826

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: UPTON, TOMMY
Address: 14243 ECON WOODS LANE
City-St-Zip: ORLANDO, FL 32826

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

Title: SD () Change (X) Addition
Name: FORTY, JAQUELINE
Address: 14308 ECON WOODS LANE
City-St-Zip: ORLANDO, FL 32826

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: JOSEPH FRASCA

RA

04/20/2009

Electronic Signature of Signing Officer or Director

Date