

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001047

FILED
Apr 29, 2008
Secretary of State

Entity Name: TOWNHOMES OF COUNTRY VIEW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

Current Mailing Address:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

5955 T.G. LEE BLVD.
SUITE 300
ORLANDO, FL 32822

FEI Number: 20-1703047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
8009 S. ORANGE AVE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT
5955 T.G. LEE BLVD.
ORLANDO, FL 32822 US

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:

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TUTCHER, CHRISTINE
Address: 12703 COUNTRY BROOK LANE
City-St-Zip: TAMPA, FL 33625

Title: V () Delete
Name: CARO, CHARLES
Address: 6020 COUNTRY GLADE WAY
City-St-Zip: TAMPA, FL 33625

Title: S/T () Delete
Name: HORVATH, ETHEL
Address: 6010 COUNTRY GLADE WAY
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHRISTINE TUTCHER

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date