

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Dec 18, 2008
Secretary of State**

DOCUMENT# N05000006047

Entity Name: BUCKINGHAM ESTATES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1600 W COLONIAL DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

1600 W COLONIAL DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 20-2981238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JACK B
1600 W COLONIAL DRIVE
ORLANDO, FL 32804 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: HUFF, KEVIN D
Address: 9426 CAMDEN FIELD PARKWAY
City-St-Zip: RIVERVIEW, FL 33578

Title: VD () Delete
Name: GIBBONS, BOB
Address: 9426 CAMDEN FIELD PARKWAY
City-St-Zip: RIVERVIEW, FL 33578

Title: SD () Delete
Name: SHARP, DONALD
Address: 9426 CAMDEN FIELD PARKWAY
City-St-Zip: RIVERVIEW, FL 33578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOUT, MARK
Address: 4681 WAYCROSS ROAD
City-St-Zip: FORT MYERS, FL 33905

Title: VD (X) Change () Addition
Name: STOUT, CHRIS
Address: 4681 WAYCROSS ROAD
City-St-Zip: FORT MYERS, FL 33905

Title: SD (X) Change () Addition
Name: BEITZER, DAN
Address: 4681 WAYCROSS ROAD
City-St-Zip: FORT MYERS, FL 33905

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: BEVERLY MALOUIN

LCAM

12/18/2008

Electronic Signature of Signing Officer or Director

Date