2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 12, 2009
Secretary of State

DOCUMENT# N06000001359

Entity Name: COBBLESTONE NORTH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

882 JACKSON AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MALCOM, THOMAS D
882 JACKSON AVENUE
WINTER PARK, FL 32789 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: ADAMS, WILLIAM B
Address: 9950 PRINCESS PALM AVE, #334
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete
Name: BENGE, TONY
Address: 1507 E. CONCORD ST.
City-St-Zip: ORLANDO, FL 32803

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ADAMS, BRYAN
Address: 4700 MILLENIA BLVD. SUITE 180
City-St-Zip: ORLANDO, FL 32839

Title: VPD (X) Change ( ) Addition
Name: HERRIN, DANN
Address: 3978 S E 99TH LANE
City-St-Zip: BELLEVIEW, FL 34420

Title: STD ( ) Change (X) Addition
Name: DARBY, ROXANNE
Address: 6103 DELTONA BLVD.
City-St-Zip: SPRING HILL, FL 34606

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: BRYAN ADAMS PD 11/12/2009
Electronic Signature of Signing Officer or Director — Date