

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003819

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** SURREY CHASE HOMEOWNERS' ASSOCIATION 2008, INC.

**Current Principal Place of Business:**

606 SURREY LANE  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

606 SURREY LANE  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 26-2445885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRITCHARD, PAUL W  
606 SURREY LANE  
LUTZ, FL 33549 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: P ( ) Delete  
Name: CORSO, YOLANDO  
Address: 505 SURREY LANE  
City-St-Zip: LUTZ, FL 33549 US

Title: VP ( ) Delete  
Name: NESMITH, QUENTIN  
Address: 507 SURREY LANE  
City-St-Zip: LUTZ, FL 33549 US

Title: S T ( ) Delete  
Name: PRITCHARD, PAUL  
Address: 606 SURREY LANE  
City-St-Zip: LUTZ, FL 33549 US

**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: PAUL PRITCHARD

S

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date