## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000006459

FILED Feb 09, 2009 Secretary of State

Entity Name: COURTYARD PLAZA PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
645 E. HWY. 50, SUITE 207 LERMONT, FL 34711		1645 E. HWY. 50, SUITE 211 CLERMONT, FL 34711		
urrent Mailing Address:		s:	New Mailing Address:	
O. BOX LERMON	.120788 NT, FL 34712			
I Number:	: 59-3641284	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
155 LAKE	ELLOW, JAYSO ESHORE DR. NT, FL 34711	ON A US		
I55 LAKE LERMON ne above	ESHORÉ DR. NT, FL 34711	US	ourpose of changing its registere	d office or registered agent, or both,
I55 LAKE LERMON ne above	ESHORE DR. NT, FL 34711  named entity selections of Florida.  RE:	US submits this statement for the p		
ISS LAKE LERMON ne above the State GNATUR	ESHORE DR. NT, FL 34711  named entity selections of Florida.  RE:	US submits this statement for the particle is Signature of Registered Ag	ent	od office or registered agent, or both,  Date  ES TO OFFICERS AND DIRECTOR
ISS LAKE LERMON ne above the State GNATUR	ESHORE DR. NT, FL 34711  named entity se of Florida. RE: Electron  S AND DIREC	US submits this statement for the plants ic Signature of Registered Ag  TORS:  Delete N, JAYSON A  RE DR.	ent	Date
55 LAKE LERMON The above the State GNATUR FFICERS e: me: dress:	ESHORE DR. NT, FL 34711  e named entity se of Florida.  RE: Electron  S AND DIRECT  PDT () STRINGFELLOT 1455 LAKESHO CLERMONT, FL	US submits this statement for the plants ic Signature of Registered Ag  FORS:  Delete N, JAYSON A  RE DR.  . 34711  Delete I RE DR.	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: JAYSON A STRINGFELLOW PDT 02/09/2009