## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N12023

FILED Jan 23, 2009 Secretary of State

Entity Name: COUNTRYSIDE AT WELLEBY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

541 SOUTH STATE ROAD 7 11110 W OAKLAND PARK BLVD

#12 #270

MARGATE, FL 33068 SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

ABSOLUTE PROPERTY MANAGEMENT 11110 W OAKLAND PARK BLVD

541 SOUTH STATE ROAD 7#12 #270

MARGATE, FL 33068 SUNRISE, FL 33351

FEI Number: 59-2771164 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BAUMAN BAUMAN & KANNER REPINSKI, NIDIA 4050 W. BROWARD BLVD. REPINSKI, NIDIA 11110 W. OAKLAND PARK BLVD

PLANTATION, FL 33317 US #270 SUNRISE, FL 33351 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: NIDIA REPINSKI 01/23/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: S ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 WIDMEYER, REBECCA
 Name:
 REPINSKI, NIDIA

 Address:
 3316 NW 101ST AVENUE
 Address:
 PO BOX 451018

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33345

Title: T ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 PINTO, YOLANDA
 Name:
 TIERNEY, MICHAEL

 Address:
 3368 NW 101 AVE.
 Address:
 10216 NW 33 PLACE

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:
 SUNRISE, FL 33351

Title: P (X) Delete Title: ( ) Change ( ) Addition

 Name:
 TIERNEY, MICHAEL
 Name:

 Address:
 10216 NW 33 PLACE
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 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: NIDIA REPINSKI VP 01/23/2009