

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 24, 2009
Secretary of State**

DOCUMENT# N38640

Entity Name: INTERLOCHEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

1149 INTERLOCHOR BLVD.
WINTER HAVEN, FL 33884 US

Current Mailing Address:

New Mailing Address:

P.O. BOX 7075
WINTER HAVEN, FL 33883 US

FEI Number: 65-0212524 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:

EASON, DON
1119 INTERLOCHEN BLVD.
WINTER HAVEN, FL 33884 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EASON, DON
Address: 1119 INTER LOCHEN BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Delete
Name: MIXON, YVONNE
Address: 1137 INTERLOCHEN BLVD
City-St-Zip: WINTER HAVEN, FL 33884

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Delete
Name: LYLE, GEORGE
Address: 1101 INTERLOCHEN BLVD.
City-St-Zip: WINTER HAVEN, FL 33884

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: YVONNE MIXON

T

04/24/2009

Electronic Signature of Signing Officer or Director

Date