

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45706

FILED
Jan 16, 2009
Secretary of State

Entity Name: VALLEY OAK HOMEOWNERS' ASSOCIATION AT THE VINEYARDS, INC.

Current Principal Place of Business:

% NEWELL PROPERTY MGMT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

% NEWELL PROPERTY MGMT
5435 JAEGER RD. #4
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 65-0364256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, WILLIAM
5435JAEGER RD #4
NAPLES, FL 34109 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: BRYANT, MARTIN
Address: 310 MONTEREY DRIVE
City-St-Zip: NAPLES, FL 34119

Title: VD () Delete
Name: LOMBARDO, TRACY
Address: 212 SILVERADO DRIVE
City-St-Zip: NAPLES, FL 34119

Title: STD () Delete
Name: TRICKER, DAVID
Address: 241 MONTEREY DRIVE
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: CRECO, JOSEPH
Address: 5880 CLOUDSTONE COURT
City-St-Zip: NAPLES, FL 34119

Title: D (X) Delete
Name: KISTNER, ANN
Address: 269 SILVERADO DRIVE
City-St-Zip: NAPLES, FL 34119

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:

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: MARTIN BRYANT

PD

01/16/2009

Electronic Signature of Signing Officer or Director

Date