

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000320

FILED
Apr 20, 2009
Secretary of State

Entity Name: COUNTRYSIDE LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

16880 SE 173RD TERRACE RD
WEIRSDALE, FL 32195

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 331
WEIRSDALE, FL 32195 US

New Mailing Address:

FEI Number: 59-3613675

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, RICHARD
16880 SE 173RD TERRACE RD
WEIRSDALE, FL 32195 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: SIEGEL, RICHARD
Address: 16880 SE 173RD TERRACE RD
City-St-Zip: WEIRSDALE, FL 32195

Title: ST () Delete
Name: KNOP, SHERRIE L
Address: 17116 SE 173RD TERRACE RD
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: PETERS, SANDRA
Address: 16960 SE 173RD TERRACE RD
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: LORD, CHARLES
Address: 17200 SE HWY 42
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: KELLER, LOUIS J
Address: 17100 SE 173RD TERRACE RD
City-St-Zip: WEIRSDALE, FL 32195 US

Title: () Delete
Name:
Address:
City-St-Zip:

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: VP (X) Change () Addition
Name: LORD, CHARLES
Address: 17200 SE HWY 42
City-St-Zip: WEIRSDALE, FL 32195

Title: D (X) Change () Addition
Name: LORD, CAROL
Address: 17200 SE HWY 42
City-St-Zip: WEIRSDALE, FL 32195 US

Title: D () Change (X) Addition
Name: PETERS, HOWARD
Address: 16960 SE 173RD TERRACE RD
City-St-Zip: WEIRSDALE, FL 32195

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: SHERRIE L. KNOP

ST

04/20/2009

Electronic Signature of Signing Officer or Director

Date