

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001445

FILED
Apr 25, 2008
Secretary of State

Entity Name: WATSON GLEN HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4343 ANCHOR PLAZA PKWY
SUITE 200
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

C/O PREMIER COMM
18215 BRANCH RD
HUDSON, FL 34667

New Mailing Address:

FEI Number: 71-1014393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEZER, STEVEN H
220 S FRANKLIN STREET
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

PREMIER COMMUNITY CONSULTANTS, INC.
18215 BRANCH RD
HUDSON, FL 34667 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: PAMELA S WASHBURN

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: BARBER, NORMAN E
Address: 4343 ANCHOR PLAZA PKWY, 200
City-St-Zip: TAMPA, FL 33634

Title: DVP () Delete
Name: MARTINEZ, RALPH
Address: 4343 ANCHOR PLAZA PKWY., 200
City-St-Zip: TAMPA, FL 33634

Title: DP () Delete
Name: THOMPSON, LEE R
Address: 4343 ANCHOR PLAZA PKWY., 200
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: TURBEVILLE, LISA
Address: 4343 ANCHOR PLAZA PKWY., 200
City-St-Zip: TAMPA, FL 33634

Title: DVP (X) Change () Addition
Name: WILKEN, CHUCK
Address: 4343 ANCHOR PLAZA PKWY., 200
City-St-Zip: TAMPA, FL 33634

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: PAMELA S WASHBURN

AGT

04/25/2008

Electronic Signature of Signing Officer or Director

Date