2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000481

FILED Apr 16, 2009 Secretary of State

Entity Name: RYBOLT'S RESERVE HOMEOWNERS ASSOCIATION, INC.

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

1750 WEST BROADWAY STREET SUITE 220

OVIEDO, FL 32765

New Mailing Address: Current Mailing Address:

P.O. BOX 620368 OVIEDO, FL 32762

FEI Number: 59-3700320 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:

COMMUNITY MANAGEMENT SPECIALISTS, INC. 1750 WEST BROADWAY STREET SUITE 220 OVIEDO, FL 32765 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:

() Delete (X) Change () Addition DREHOBL, BILL PEACOCK, MATT Name: Name:

4206 NOTHERN DANCER WAY Address: 4719 NORTHERN DANCER WAY Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826

Title: Title: (X) Change () Addition () Delete MOREJRA, JOE Name: GOODNOUGH, MICHELLE Name:

Address: 4545 NORTHERN DANCER WAY Address: 4854 AGUILA PLACE City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826

Title: () Delete Title: (X) Change () Addition KERR, PATRICK MILL, STEVEN Name: Name:

14527 UNBRIDLED DR 4831 NATIVE DANCER LANE Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826

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

Name: BRAND, STEFAN Name: BRAND, STEFAN 14843 AFFIMED CT Address: Address: 14843 AFFIMED CT ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826 City-St-Zip:

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

MACHADO, DIANE MACHADO, DIANE Name: Name:

4944 NAFIRE DANCER LANE 4944 NAFIRE DANCER LANE Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826

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: STEFAN BRAND Ρ 04/16/2009