2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N49742

Entity Name: SILVER BEND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PREMIER COMMUNITY MANAGERS
5151 ADAMSON ST STE 103
ORLANDO, FL 32804 US

New Principal Place of Business:

PREMIER COMMUNITY MANAGERS
5151 ADANSON ST STE 103
ORLANDO, FL 32804 US

Current Mailing Address:

PREMIER COMMUNITY MANAGERS
5151 ADAMSON ST STE 103
ORLANDO, FL 32804 US

New Mailing Address:

PREMIER COMMUNITY MANAGERS
5151 ADANSON ST STE 103
ORLANDO, FL 32804 US

FEI Number: 59-3134865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOUSE, GARY
PREMIER COMMUNITY MANAGERS
5151 ADAMSON ST STE 103
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

HOUSE, GARY
PREMIER COMMUNITY MANAGERS
5151 ADANSON ST STE 103
ORLANDO, FL 32804 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: _____ 04/13/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: BUTKOVICH, DAVID
Address: 2019 CASSINGHAM
City-St-Zip: OCOEE, FL 34761

Title: D ( ) Delete
Name: KILICK, TROY
Address: 1901 CASSINGHAM CIAR
City-St-Zip: OCOEE, FL 34761

Title: DS ( ) Delete
Name: HARRISON, DEDRA
Address: 1685 CASSINGHAM CIR
City-St-Zip: OCOEE, FL 34761

Title: DV ( ) Delete
Name: RANDALL, STEVE
Address: 2202 ALCLOBE CIR.
City-St-Zip: OCOEE, FL 34761

Title: D (X) Delete
Name: FORGES, LOU
Address: 130 CLOWESN CT
City-St-Zip: OCOEE, FL 34761

Title: P (X) Delete
Name: BUTKOVICH, PAT
Address: 2019 CASSINGHAM CIRCLE
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: RANDALL, STEVEN
Address: 2202 ALCLOBE CIR
City-St-Zip: OCOEE, FL 34761

Title: D (X) Change ( ) Addition
Name: KIICK, TROY
Address: 1901 CASSINGHAM CIAR
City-St-Zip: OCOEE, FL 34761

Title: D (X) Change ( ) Addition
Name: HARRISON, DEBRA A
Address: 1685 CASSINGHAM CIR
City-St-Zip: OCOEE, FL 34761

Title: S (X) Change ( ) Addition
Name: RIVERA, JOSE
Address: 138 CREPE MYRTLE DR
City-St-Zip: GROVELAND, FL 34736

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: STEVEN RANDALL VP 04/13/2009
Electronic Signature of Signing Officer or Director — Date