

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004999

FILED
Apr 30, 2009
Secretary of State

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

Current Principal Place of Business:

% 9924 BURGUNDY BAY ST.
ORLANDO, FL 32817

New Principal Place of Business:

9924 BURGUNDY BAY ST.
ORLANDO, FL 32817

Current Mailing Address:

% LIGHTHOUSE MANAGEMENT
P.O. BOX 0774
WINDERMERE, FL 347860774

New Mailing Address:

% LIGHTHOUSE MGMT. & CONSULTING
P.O. BOX 0774
WINDERMERE, FL 347860774

FEI Number: 59-3363478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, PA
C/O C. JOHN CHRISTENSEN, ESQ
2500 MAITLAND CTR PKWY STE 209
MAITLAND, FL 32751 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: BISHOP, WILLIAM D III
Address: 9924 BURGUNDY BAY ST
City-St-Zip: ORLANDO, FL 32817

Title: SD () Delete
Name: BISHOP, YVETTE
Address: 9924 BURGUNDY BAY
City-St-Zip: ORLANDO, FL 32817

Title: VD () Delete
Name: LESTER, DEAN
Address: 9927 KONA ISLE CT
City-St-Zip: ORLANDO, FL 32817

Title: D () Delete
Name: SHELNUTT, STEVE
Address: 9925 BURGUNDY BAY ST
City-St-Zip: ORLANDO, FL 32817

Title: TD () Delete
Name: PRATT, DAVID
Address: 9918 BURGUNDY BAY ST
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: LESTER, DEAN
Address: 9927 KONA ISLE CT
City-St-Zip: ORLANDO, FL 32817

Title: DT (X) Change () Addition
Name: SHELNUTT, STEVE
Address: 9925 BURGUNDY BAY ST
City-St-Zip: ORLANDO, FL 32817

Title: D (X) Change () Addition
Name: PRATT, DAVID
Address: 9918 BURGUNDY BAY ST
City-St-Zip: ORLANDO, FL 32817

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: WILLIAM BISHOP

DP

04/30/2009

Electronic Signature of Signing Officer or Director

Date