2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000000139

TI FILED
Oct 18, 2010
Secretary of State

Entity Name: COBBLESTONE OF MARION COUNTY HOMEOWNERS' ASSOCIATION, INC.

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

2180 WEST SR 434 6972 LAKE GLORIA BLVD SUITE 5000 ORLANDO, FL 32809

LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 6972 LAKE GLORIA BLVD SUITE 5000 ORLANDO, FL 32809 LONGWOOD, FL 327795044

FEI Number: 59-3740796 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:

FURLOW, REBECCA 6972 LAKE GLORIA BLVD ORLANDO, FL 32809 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: REBECCA FURLOW 10/18/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD

Name: DELDUCE, GREG
Address: 10345 SE 42ND CT
City-St-Zip: BELLEVIEW, FL 34420

Title: SD

 Name:
 WEBB, RONALD

 Address:
 10280 SE 42ND CT

 City-St-Zip:
 BELLEVIEW, FL 34420

Title: VPD

 Name:
 LOMAX, GLEN

 Address:
 10365 SE 42ND CT

 City-St-Zip:
 BELLEVIEW, FL 34420

Title: PD

Name: SANDERS, NORMA Address: 4300 SE 106TH ST City-St-Zip: BELLEVIEW, FL 34420

Title: D

Name: RODRIGUEZ, ANTONIO
Address: 10240 SE 42ND CT
City-St-Zip: BELLEVIEW, FL 34420

I hereby 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 all other like empowered.

SIGNATURE: NORMA SANDERS PRES 10/18/2010