

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723108

FILED
Mar 01, 2009
Secretary of State

Entity Name: VILLAGE OF GOLF HOMEOWNERS ASSOCIATION, INC

Current Principal Place of Business:

21 COUNTRY ROAD
VILLAGE OF GOLF, FL 334365299

New Principal Place of Business:

3 COUNTRY CLUB CIR
VILLAGE OF GOLF, FL 334365605

Current Mailing Address:

21 COUNTRY ROAD
VILLAGE OF GOLF, FL 334365299

New Mailing Address:

3 COUNTRY CLUB CIR
VILLAGE OF GOLF, FL 334365605

FEI Number: 59-1415847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUVILLE, JEAN E TD
15 COUNTRY ROAD
VILLAGE OF GOLF, FL 33436 US

Name and Address of New Registered Agent:

GOOD III, JAMES W TREAS
3 COUNTRY CLUB CIR
VILLAGE OF GOLF, FL 33436 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: JAMES W GOOD III

03/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BIRLE, MARY
Address: 2 PINE LANE EAST
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: PD () Delete
Name: FULLER, MARK A
Address: 13 COUNTRY ROAD SOUTH
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: TD () Delete
Name: DOUVILLE, JEAN E
Address: 15 COUNTRY ROAD
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: S () Delete
Name: BIRLE, MARY
Address: 2 PINE LANE EAST
City-St-Zip: VILLAGE OF GOLF, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BIRLE, MARY
Address: 2 PINE LANE EAST
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: V P (X) Change () Addition
Name: NEWTON JR, RAY E
Address: 49 COUNTRY RD SOUTH
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: TREA (X) Change () Addition
Name: GOOD III, JAMES W
Address: 3 COUNTRY CLUB CIR
City-St-Zip: VILLAGE OF GOLF, FL 33436

Title: SEC (X) Change () Addition
Name: BURKE, PATSY
Address: 4 TURTLE GROVE LN
City-St-Zip: VILLAGE OF GOLF, FL 33436

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: JAMES W GOOD III

TREA

03/01/2009

Electronic Signature of Signing Officer or Director

Date