

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727052

FILED
Feb 15, 2009
Secretary of State

Entity Name: EAST BAY HOMEOWNERS, INC.

Current Principal Place of Business:

P O BOX 690153
ORLANDO, FL 328697153

New Principal Place of Business:

8435 CARAWAY CT
ORLANDO, FL 32819

Current Mailing Address:

P O BOX 690153
ORLANDO, FL 328697153 US

New Mailing Address:

8435 CARAWAY CT
ORLANDO, FL 32819 US

FEI Number: 59-1912630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRYS, BARBARA A
6195 VALERIAN BLVD
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

BELL, GAIL
8435 CARAWAY CT
ORLANDO, FL 32819 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: GAIL BELL

02/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRYS, BARBARA
Address: 6195 VALERIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: VP () Delete
Name: WITTHOHN, TOMMIR
Address: 8491 CARAWAY CT
City-St-Zip: ORLANDO, FL 32819

Title: S () Delete
Name: BONESTROD, CAROL
Address: 8570 CLOVER CT
City-St-Zip: ORLANDO, FL 32819

Title: TREA () Delete
Name: BELL, GAIL
Address: 8435 CARAWAY CT
City-St-Zip: ORLANDO, FL 32819

Title: BM () Delete
Name: WEBB, SANDY
Address: 8740 BANYAN BLVD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEBB, SANDRA
Address: 8740 BANYAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: VP (X) Change () Addition
Name: MARTINEZ, LAURIE
Address: 6175 VALERIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: S (X) Change () Addition
Name: OTT, KERRY
Address: 6189 VALERIAN BLVD
City-St-Zip: ORLANDO, FL 32819

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

Title: BM (X) Change () Addition
Name: HOBACK, TOM
Address: 8434 CARAWAY CT
City-St-Zip: ORLANDO, FL 32819

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: GAIL BELL

TREA

02/15/2009

Electronic Signature of Signing Officer or Director

Date