

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727831

FILED  
Jan 04, 2010  
Secretary of State

**Entity Name:** EMBASSY HILLS CIVIC ASSN., INC.

**Current Principal Place of Business:**

9509 PALM AVENUE  
PORT RICHEY, FL 346684647

**New Principal Place of Business:**

**Current Mailing Address:**

9509 PALM AVENUE  
PORT RICHEY, FL 346684647

**New Mailing Address:**

**FEI Number:** 23-7351982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROWE, PATRICIA J  
7100 CUTTY SARK DR  
PORT RICHEY, FL 34668 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: P  
Name: STICKLER, WANDA  
Address: 7150 ISLE DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: 1VP  
Name: NUCE, RONALD  
Address: 9040 SHALLOWFORD LN  
City-St-Zip: PORT RICHEY, FL 34668

Title: D  
Name: TUBBS, WILLIAM  
Address: 7025 KINGSWAY DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: D  
Name: HENKEL, ELIZABETH  
Address: 8937 PANDORA LN  
City-St-Zip: PORT RICHEY, FL 34668

Title: D  
Name: LEFEBVRE, ELIZABETH  
Address: 7240 MORAVIAN DR  
City-St-Zip: PORT RICHEY, FL 34668

Title: D  
Name: RUBINO, FRANK  
Address: 7341 OAKSHIRE  
City-St-Zip: PORT RICHEY, FL 34668

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: RONALD K. NUCE

1VP

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date