

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731174

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** TOWNE EAST HOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

P. O. BOX 12501  
TALLAHASSEE, FL 323179501

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 12501  
TALLAHASSEE, FL 323179501

**New Mailing Address:**

**FEI Number:** 59-2227755

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATSON, RUDY  
453 COLLINSFORD RD.  
TALLAHASSEE, FL 32301 US

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

FLEISCHER, JENNIFER  
2400 CASTLETOWER ROAD  
TALLAHASSEE, FL 32301 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: JENNIFER FLEISCHER

01/28/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WATSON, RUDY  
Address: 453 COLLINSFORD RD.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: WILLIAM, FOX  
Address: 2419 HAYS MILL ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: WOERNER, GEORGE  
Address: 2420 HAYS MILL ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: TD ( ) Delete  
Name: ALLIGOOD, SARA S  
Address: 110-A S. MONROE ST  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: ENGLEMARK, GEORGE  
Address: 2436 CASTLETOWER RD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DV ( ) Delete  
Name: SINGLETARY, WES  
Address: 405 COLLINSFORD RD  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: FLEISCHER, JENNIFER  
Address: 2400 CASTLETOWER ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

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

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

Title: TD (X) Change ( ) Addition  
Name: ABT, DEBRA  
Address: 420 COLLINSFORD ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

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

Title: DV (X) Change ( ) Addition  
Name: PIERSON, CHUCK  
Address: 873 KINGSWAY ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

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: JENNIFER FLEISCHER

PRES

01/28/2009

Electronic Signature of Signing Officer or Director

Date