2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#738818

FILED Jan 20, 2009 Secretary of State

Entity Name: VALENCIAWOOD HILLS COMMUNITY ASSOCIATION, INC.

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

313 HERNANDO RD 314 HERNANDO RD

WINTER HAVEN, FL 33884 US WINTER HAVEN, FL 33884 US

Current Mailing Address: New Mailing Address:

PO BOX 1673

WINTER HAVEN, FL 33882

FEI Number: 59-1793582 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:

KLEMM, RUSSELL E ESQ. 1065 MAITLAND CENTER COMMONS BLVD. MAITLAND, FL 32751 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:

L. _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name:UMSTEAD, SUEName:BARBERET, JOHNAddress:465 LIBERTYAddress:418 FLAGLER DR.

City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: WINTER HAVEN, FL 33884

Title: TD () Delete Title: () Change () Addition

 Name:
 TRINKLEIN, DANIEL M
 Name:

 Address:
 314 HERNANDO RD
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 COFFMAN, THOMAS W
 Name:

 Address:
 300 HERNANDO RD
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:

 $\label{eq:title:sphere:title:$

 Name:
 VELEY, CHRISTOPHER
 Name:
 WERSTAK, JAMES

 Address:
 402 FLAGLER RD
 Address:
 276 HERNANDO RD.

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:
 WINTER HAVEN, FL 33884

 Name:
 WESRTAK, JAMES C
 Name:
 REDDOUT, BRENDA

 Address:
 276 HERNANDO RD.
 Address:
 310 HERNANDO RD.

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:
 WINTER HAVEN, FL 33884

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: DANIEL M. TRINKLEIN TD 01/20/2009