

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754147

FILED
Mar 04, 2009
Secretary of State

Entity Name: PHEASANT COURT VILLAS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P&M PROPERTY MANAGEMENT
14360 S. TAMiami TRAIL UNIT B
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

P&M PROPERTY MANAGEMENT
14360 S. TAMiami TRAIL UNIT B
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 59-2121481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPP, PAUL
P&M PROPERTY MANAGEMENT
14360 S. TAMiami TRAIL UNIT B
FORT MYERS, FL 33912 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: PD () Delete
Name: HAMILTON, GARY
Address: 16743 PHEASANT COURT SW
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: BUSCH, CONSTANCE
Address: 16741 PHEASANT COURT SE
City-St-Zip: FORT MYERS, FL 33908

Title: TS () Delete
Name: KRUEGER, KAY
Address: 16739 PHEASANT CT SW
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PAUL SAPP

CFPM

03/04/2009

Electronic Signature of Signing Officer or Director

Date