

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754203

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** ROSEBUD PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

LOT 1097 ROSEBUD AVE  
OKEECHOBEE, FL 34974 US

**New Principal Place of Business:**

LOT 1155 ROSEBUD AVE  
OKEECHOBEE, FL 34974 US

**Current Mailing Address:**

LOT 1097 ROSEBUD AVE  
OKEECHOBEE, FL 34974 US

**New Mailing Address:**

LOT 1155 ROSEBUD AVE  
OKEECHOBEE, FL 34974 US

**FEI Number:** 65-0016558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRADLEY, MAUREEN  
1097 ROSEBUD AVE  
OKEECHOBEE, FL 34974 US

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

HALE, CHARLES  
1155 ROSEBUD AVE  
OKEECHOBEE, FL 34974 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: CHARLES HALE

04/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: VAUGHN, LILLIAN  
Address: 1147 ROSEBUD AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: S ( ) Delete  
Name: MUNDY, WANDA  
Address: 1185 ROSEBUD AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: T ( ) Delete  
Name: BRADLEY, MAUREEN  
Address: 1097 ROSEBUD AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: P ( ) Delete  
Name: HALE, CHUCK  
Address: 1155 ROSEBUD AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974

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

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

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

Title: T (X) Change ( ) Addition  
Name: HULETT, ESTER  
Address: 1085 ROSEBUD AVE  
City-St-Zip: OKEECHOBEE, FL 34974

Title: P (X) Change ( ) Addition  
Name: HALE, CHARLES  
Address: 1155 ROSEBUD AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974

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: CHARLES HALE

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date