

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757922

FILED
Apr 24, 2009
Secretary of State

Entity Name: ROSETREE VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

STERLING MANAGEMENT
2870 SCHERER DR N STE 100
SAINT PETERSBURG, FL 33716 US

New Principal Place of Business:

Current Mailing Address:

STERLING MANAGEMENT
2870 SCHERER DR N STE 100
SAINT PETERSBURG, FL 33716 US

New Mailing Address:

FEI Number: 59-2123013 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTERILL, RON
1010 N FLORIDA LN
STE 2625
TAMPA, FL 33602 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: D () Delete
Name: CARDOSO, TOM
Address: 7360 ULMERTON RD 14A
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: LANT, DOREEN
Address: 7360 ULMERTON RD 15D
City-St-Zip: LARGO, FL 33771

Title: TD () Delete
Name: CAIN, RICK
Address: 7360 ULMERTON RD 16D
City-St-Zip: LARGO, FL 33771

Title: P () Delete
Name: MAKRES, PETER
Address: 7360 ULMERTON RD #22-E
City-St-Zip: LARGO, FL

Title: S () Delete
Name: GIACALONE, MARCIA
Address: 7360 ULMERTON RD 5C
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: SCOTT, KAPLAN
Address: 7360 ULMERTON RD 21D
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: FASSETT, BRENDON
Address: 7360 ULMERTON RD 25B
City-St-Zip: LARGO, FL 33771

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: JOE SANDERS

PM

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date