

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 24, 2012
Secretary of State

DOCUMENT# 758228

Entity Name: POINCIANA VILLAGE NINE ASSOCIATION, INC.**Current Principal Place of Business:**C/O HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD #214
WINTER PARK, FL 32792 US**New Principal Place of Business:**234 BOSCOBEL DRIVE
KISSIMMEE, FL 34758 US**Current Mailing Address:**C/O HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD #214
WINTER PARK, FL 32792 US**New Mailing Address:**234 BOSCOBEL DRIVE
KISSIMMEE, FL 34758 US**FEI Number:** 59-2224138**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HARA, ROBERT
C/O HARA MANAGEMENT, INC.
931 S. SEMORAN BLVD #214
WINTER PARK, FL 32792 US**Name and Address of New Registered Agent:**GLAZER & ASSOCIATES, P.A.
4767 NEW BROAD STREET
332
ORLANDO, FL 32814 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: PENNIE S.A. MAYS, ESQ.

08/24/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MARTIN, GARY
Address: 931 S. SEMORAN BLVD - STE 214
City-St-Zip: WINTER PARK, FL 32792

Title: VP
Name: STULLER, GENE
Address: 931 S. SEMORAN BLVD- STE 214
City-St-Zip: ORLANDO, FL 32792

Title: S
Name: MCKNIGHT, THOMAS
Address: 931 S. SEMORAN BLVD- STE 214
City-St-Zip: ORLANDO, FL 32792

Title: T
Name: WARD, RENATE M
Address: 931 S. SEMORAN BLVD - STE 214
City-St-Zip: ORLANDO, FL 32792

Title: D
Name: RAITH, ROBERT
Address: 931 S. SEMORAN BLVD - STE 214
City-St-Zip: ORLANDO, FL 32792

Title: D
Name: PERRY, LINDA
Address: 931 S. SEMORAN BLVD- STE 214
City-St-Zip: ORLANDO, FL 32792

I hereby 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 all other like empowered.

SIGNATURE: GARY MARTIN

PD

08/24/2012

Electronic Signature of Signing Officer or Director

Date