

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759734

FILED
Mar 31, 2009
Secretary of State

Entity Name: COOPERSMITH VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

600 HUNTER CIRCLE
KISSIMMEE, FL 34758

New Principal Place of Business:

Current Mailing Address:

600 HUNTER CIRCLE
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 59-2224135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COAMEY & CLARK, P.A
2699 LEE ROAD, STE 430
WINTER PARK, FL 32789 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: BARONGI, ANTHONY
Address: 465 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: VPD () Delete
Name: HONORE, STEPHANIE
Address: 501 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: D () Delete
Name: JOHNSTON, ANNA M
Address: 501 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: SD () Delete
Name: MILLITO, MARINA
Address: 473 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: TD () Delete
Name: FLOURNOY, SANDRA
Address: 497 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THIBAUT, FERNAND C
Address: 569 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: D (X) Change () Addition
Name: HONORE, STEPHANIE
Address: 831 ADOUR DRIVE
City-St-Zip: KISSIMMEE, FL 34759

Title: VPD (X) Change () Addition
Name: FALCO, JOSEPH
Address: 440 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: SD (X) Change () Addition
Name: KNOLLINGER, ELENA
Address: 520 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: TD (X) Change () Addition
Name: WILKINSON, EDITH
Address: 522 HUNTER CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

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: STEPHANIE HONORE'

Electronic Signature of Signing Officer or Director

DIR

03/31/2009

Date