

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759860

FILED
Mar 20, 2009
Secretary of State

Entity Name: GREENWOOD LAKES - UNIT 3 HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 953184
LAKE MARY, FL 327953184

New Principal Place of Business:

404 LAKESHORE DRIVE
LAKE MARY, FL 32746

Current Mailing Address:

PO BOX 953184
LAKE MARY, FL 327953184

New Mailing Address:

PO BOX 953184
LAKE MARY, FL 32795

FEI Number: 74-2004853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN, SANDRA V
404 LAKESHORE DR
LAKE MARY, FL 32746 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: SOC (X) Delete
Name: WOOD, WENDY
Address: 405 LAKESHORE DR
City-St-Zip: LAKE MARY, FL 32746

Title: DS () Delete
Name: BENNETT, EVELINE
Address: 413 LAKESHORE CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: VP (X) Delete
Name: HARRIS, LARRY
Address: 445 LAKESHORE DR.
City-St-Zip: LAKE MARY, FL 32746

Title: T () Delete
Name: SANDY, DEAN
Address: 404 LAKESHORE DR
City-St-Zip: LAKE MARY, FL 32746

Title: P () Delete
Name: TYLER, FRED
Address: 533 LAKESHORE CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: ARB () Delete
Name: MARTIN, JO ANN
Address: 794 GLENWOOD DRIVE
City-St-Zip: LAKE MARY, FL 32746

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:

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

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

Title: VP (X) Change () Addition
Name: MARTIN, JO ANN
Address: 794 GLENWOOD DRIVE
City-St-Zip: LAKE MARY, FL 32746

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: SANDRA DEAN

T

03/20/2009

Electronic Signature of Signing Officer or Director

Date