2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 762408

Entity Name: WEKIVA COUNTRY CLUB VILLAS, HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

107 N LINE DR.
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

107 N LINE DR
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-2098344 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA D
107 N LINE DRIVE
APOPKA, FL 32703 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: AUKER, HOWARD
Address: 125 GOLF CLUB DRIVE
City-St-Zip: LONGWOOD, FL 32779 US

Title: VPD ( ) Delete
Name: PERZAN, JOE
Address: 100 GOLF CLUB DR
City-St-Zip: LONGWOOD, FL 32779 US

Title: TD ( ) Delete
Name: KORINEK, BUD
Address: 116 GOLF CLUB DR
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Delete
Name: AVERY, HELEN
Address: 164 GOLF CLUB DR
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Delete
Name: SANDLER, LARRY
Address: 131 GOLF CLUB DR
City-St-Zip: LONGWOOD, FL 32779 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PERZAN, JOE
Address: 100 GOLF CLUB DRIVE
City-St-Zip: LONGWOOD, FL 32779 US

Title: VPD (X) Change ( ) Addition
Name: SWOPE, PAUL
Address: 154 GOLF CLUB DRIVE
City-St-Zip: LONGWOOD, FL 32779 US

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

Title: SD (X) Change ( ) Addition
Name: AVERY, HELEN
Address: 164 GOLF CLUB DR
City-St-Zip: LONGWOOD, FL 32779 US

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

Title: D ( ) Change (X) Addition
Name: FARRINGTON, DOROTHY
Address: 133 GOLF CLUB DRIVE
City-St-Zip: LONGWOOD, FL 32279 US

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 PERZAN PD 04/13/2009

Electronic Signature of Signing Officer or Director — Date