

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763613

FILED
Feb 24, 2009
Secretary of State

Entity Name: GLENEAGLES GREEN HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

150 GLENEAGLES DRIVE
NICEVILLE, FL 32578 US

New Principal Place of Business:

4502 HWY 20 EAST
SUITE B
NICEVILLE, FL 32578 US

Current Mailing Address:

PO BOX 5021
NICEVILLE, FL 32588 US

New Mailing Address:

FEI Number: 59-2397795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, SAMMIE E
150 GLENEAGLES DRIVE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

JERNIGAN, JAMES A
4502 HWY 20 EAST
SUITE B
NICEVILLE, FL 32578 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: JAMES A JERNIGAN

02/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARRISON, SAMMIE E
Address: 150 GLENEAGLES DRIVE
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: THOMPSON, DAVID
Address: 131 GLENEAGLES DRIVE
City-St-Zip: NICEVILLE, FL 32578

Title: SD () Delete
Name: FEIFEL, VICTORIA
Address: 138 GLENEAGLES DR.
City-St-Zip: NICEVILLE, FL 32578

Title: D () Delete
Name: BORTHWICK, JESSE
Address: 100 GLENEAGLES DR.
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: PATE, ROBERT
Address: 112 DICKSON DRIVE
City-St-Zip: BELLE CHASE, LA 70037

Title: PD (X) Change () Addition
Name: THOMPSON, DAVID
Address: 131 GLENEAGLES DRIVE
City-St-Zip: NICEVILLE, FL 32578

Title: SD (X) Change () Addition
Name: FEIGEL, VICTORIA
Address: 138 GLENEAGLES DR.
City-St-Zip: NICEVILLE, FL 32578

Title: VPD (X) Change () Addition
Name: BORTHWICK, JESSE
Address: 100 GLENEAGLES DR.
City-St-Zip: NICEVILLE, FL 32578

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: VICTORIA FEIGEL

SD

02/24/2009

Electronic Signature of Signing Officer or Director

Date