

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768511

FILED
Jun 25, 2009
Secretary of State

Entity Name: ERCILDOUNE HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8006 140TH STREET
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

8006 140TH STREET
SEBASTIAN, FL 32958

New Mailing Address:

FEI Number: 59-2292336 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POWELL, HILDA
8026 141ST STREET
SEBASTIAN, FL 32958 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: HENDERSON, KAMALA
Address: 8006 140TH STREET
City-St-Zip: SEBASTIAN, FL 32958

Title: VPSD () Delete
Name: STOCKER, JULIE
Address: 9804 RIVERVIEW DRIVE
City-St-Zip: SEBASTIAN, FL 32976

Title: T () Delete
Name: POWELL, HILDA
Address: 8026 141ST STREET
City-St-Zip: SEBASTIAN, FL 32958

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:

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: KAMALA HENDERSON

PD

06/25/2009

Electronic Signature of Signing Officer or Director

Date