2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2009
Secretary of State

DOCUMENT# 769074

Entity Name: COUNTRY LAKE HOMEOWNERS ASSOCIATION, INC OF PALMBEACH COUNTY

Current Principal Place of Business:

UNITED COMMUNITY MGT.
11784 SAMPLE RD. #103
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

UNITED COMMUNITY MGT.
11784 SAMPLE RD. #103
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 59-2378208 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGT. CORP.
11784 W. SAMPLE RD. #103
CORAL SPRINGS, FL 33065 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:	D	( ) Delete
Name:	JOHNSON, MARSHALL	
Address:	16365 WATER WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	PD	( ) Delete
Name:	SWANSONS, CHRISTINA	
Address:	16269 AVECADO WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	VPD	( ) Delete
Name:	SCHOENBERG, DEE	
Address:	16341 COUNTRY LAKE CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	STD	( ) Delete
Name:	HESSELTON, DICK	
Address:	16273 FRUIT WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	JOHNSON, MARSHALL	
Address:	16365 WATER WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	(X) Change ( ) Addition
Name:	FIELER, REBECCA	
Address:	16339 COUNTRY LAKE CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	STD	(X) Change ( ) Addition
Name:	HESSELTON, RICHARD	
Address:	16273 FRUIT WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	D	( ) Change (X) Addition
Name:	GOGLIORMETTA, ROBIN	
Address:	16267 FIG WAY	
City-St-Zip:	DELRAY BEACH, FL 33484	

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: MARY LOU PALMER AGT 03/11/2009

Electronic Signature of Signing Officer or Director — Date