## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J02254

FILED Mar 13, 2009 Secretary of State

Entity Name: ARROWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
500 FELL MELBOUR	.RD. RNE, FL 32904					
Current Mailing Address:			New Maili	New Mailing Address:		
500 FELL MELBOUR	.RD. RNE, FL 32904					
El Number:	59-2684784	FEI Number Applied For()	FEI Number Not App	licable ( ) Certific	ate of Status Desired()	
lame and	Address of C	urrent Registered Agent:	Name and	Address of New Reg	gistered Agent:	
825 SOUT	JAMES L TH RIVERVIEV NE, FL 32901					
	named entity s of Florida.	submits this statement for the	purpose of changing i	ts registered office or	registered agent, or both,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	jent		Date	
lection Can	npaign Financing	Trust Fund Contribution ( ).				
FFICERS	S AND DIRECT	гоrs:	ADDITION	IS/CHANGES TO OF	FICERS AND DIRECTORS	
itle: ame: ddress: ity-St-Zip:	RAYNOR, DAYL 486 BOONE AV		Title: Name: Address: City-St-Zip:	DP (X) Change GLAZE, RICHARD 415 BUFFALO STREET WEST MELBOURNE, FL		
itle:		Delete	Title: Name:	DV (X) Change		
ame: ddress: ity-St-Zip:	433 BUFFALO S WEST MELBOU		Address: City-St-Zip:	VANBUSKIRK, BETTY 433 BUFFALO ST. WEST MELBOURNE, FL		
ddress:	WEST MELBOU	ST. JRNE, FL 32904 Delete IA D STREET	Address:	433 BUFFALO ST. WEST MELBOURNE, FL		
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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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORENA MAASS DS 03/13/2009