

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003329

FILED
Mar 24, 2009
Secretary of State

Entity Name: VERMILLION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2870 SCHERER DR
SUITE 100
SAINT PETERSBURG, FL 33716 US

New Principal Place of Business:

Current Mailing Address:

2870 SCHERER DR
SUITE 100
SAINT PETERSBURG, FL 33716 US

New Mailing Address:

FEI Number: 59-3671024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COTTERILL, RON PA
1010 NORTH FLORIDA
TAMPA, FL 33602 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: P () Delete
Name: RICHARDS, EVELYN
Address: 1122 KENNEWICK CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VP () Delete
Name: MCLAUGHLINS, RITA
Address: 1316 STANDRIDGE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S () Delete
Name: HOSKINS, MELISSA
Address: 1223 KENNEWICK CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T () Delete
Name: CARTER, KEVIN
Address: 1136 KENNEWICK CT
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: LEAKE, MICHAEL
Address: 1212 KENNEWICK CT
City-St-Zip: ZEPHYRHILLS, FL 33543

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:

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: GAIL KNIGHT

MGR

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date