2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 15, 2009
Secretary of State

DOCUMENT# N00000003518

Entity Name: WESTBERRY HIDEAWAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2902 WESTBERRY HIDEAWAY
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 57544
JACKSONVILLE, FL 32241

New Mailing Address:

POST OFFICE BOX 600232
JACKSONVILLE, FL 32260

FEI Number: 59-3652485 **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:

CULLUM, JASON M
2902 WESTBERRV HIDEAWAY COURT
JACKSONVILLE, FL 32223 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: SD ( ) Delete
Name: ORT, CAROL
Address: 12542 WESTBERRY HIDEAWAY LN
City-St-Zip: JACKSONVILLE, FL 32223

Title: PD ( ) Delete
Name: CULLUM, JASON
Address: 2902 WESTBERRY HIDEAWAY CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD ( ) Delete
Name: GOODBEE, PAULA
Address: 2901 WESTBERRY HIDEAWAY CT
City-St-Zip: JACKSONVILLE, FL 32223

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: JASON CULLUM PR 09/15/2009

Electronic Signature of Signing Officer or Director — Date