

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006230

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Entity Name:** WEST ROBERTS ESTATES SUBDIVISION HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

400 MEGAN DR  
CANTONMENT, FL 32533

**New Principal Place of Business:**

**Current Mailing Address:**

400 MEGAN DR  
CANTONMENT, FL 32533

**New Mailing Address:**

**FEI Number:** 59-3683670

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRENCH, M.D.  
400 MEGAN DR  
CANTONMENT, FL 32533 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: SDT  
Name: FRENCH, MIKE  
Address: 400 MEGAN DR.  
City-St-Zip: CANTONMENT, FL 32533

Title: DP  
Name: JONES, BOB  
Address: 405 MEGAN DR.  
City-St-Zip: CANTONMENT, FL 32533

Title: D  
Name: HUTCHINGS, LAWRENCE  
Address: 1129 CARLA DR.  
City-St-Zip: CANTONMENT, FL 32533

Title: D  
Name: LEONARD, JEFF  
Address: 415 MEGAN DR  
City-St-Zip: CANTONMENT, FL 32533

I hereby 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 all other like empowered.

SIGNATURE: M. D. FRENCH

SDT

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date