2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N00000007344

Entity Name: VERANDAHS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

240 APOLLO BEACH BLVD
APOLLO BEACH, FL 33572

New Principal Place of Business:

3536 BEAU CHENE DRIVE
KISSIMMEE, FL 34746

Current Mailing Address:

P O BOX 420788
KISSIMMEE, FL 34742

New Mailing Address:

FEI Number: 04-3599352 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SANTIAGO, ROLANDO J
240 APOLLO BEACH BLVD
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

BROWN, BARRINGTON E
3536 BEAU CHENE DRIVE
KISSIMMEE, FL 34746 US

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: BARRINGTON E. BROWN 03/31/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BROWN, BARRINGTON E
Address: 3536 BESU CHENE DR
City-St-Zip: KISSIMMEE, FL 34746

Title: VPD ( ) Delete
Name: SMITH, BILL
Address: 3540 BEAU CHENE DR
City-St-Zip: KISSIMMEE, FL 34745

Title: SD ( ) Delete
Name: DODGE, JACQUELINE
Address: 3515 BEAU CHENE DR
City-St-Zip: KISSIMMEE, FL 34746

Title: TD ( ) Delete
Name: BIRCHALL, DONNA
Address: 3541 BEAU CHENE DR
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: IRRIZARY, JEANETTE
Address: 4005 BEAU RIVAGE DR
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BROWN, BARRINGTON E
Address: 3536 BEAU CHENE DR
City-St-Zip: KISSIMMEE, FL 34746

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: BARRINGTON E. BROWN PD 03/31/2009
Electronic Signature of Signing Officer or Director Date