2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000002066

TI FILED
Oct 14, 2009
Secretary of State

Entity Name: THE HAMLET AT SHERMAN OAKS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3463 SW 18TH PLACE OCALA, FL 34474

Current Mailing Address: New Mailing Address:

PO BOX 773283 OCALA, FL 344773283

FEI Number: 86-1125582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHERMAN, EDWARD JR.

3463 SW 18TH PLACE

OCALA, FL 34474 US

SHERMAN, GLENDA

3463 SW 18TH PLACE

OCALA, FL 34474 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: CYNTHIA BATTISTI 10/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: S (X) Change () Addition Name: SHERMAN, GLENDA Name: SHERMAN, GLENDA

 Name:
 SHERWAN, GLENDA

 Address:
 3463 SW 18TH PLACE

 City-St-Zip:
 OCALA, FL 34474

 City-St-Zip:
 OCALA, FL 34474

Title: D () Delete Title: () Change () Addition Name: FEDER, RUSSELL L Name:

 Name:
 FEDER, RUSSELL L
 Name:

 Address:
 567 NW 82ND COURT
 Address:

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition Name: BATTISAI, CINDY Name: BATTISTI, CYNTHIA

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 CLARK, CHUCH
 Name:
 CLARK, CHUCK

 Address:
 609 NW 82ND CT
 Address:
 609 NW 82ND CT

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:
 OCALA, FL 34482

Title: PD () Delete Title: () Change () Addition

 Name:
 GREGORY, SUSAN
 Name:

 Address:
 608 NW 82ND COURT
 Address:

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 CARRUS, LINDA

 Address:
 Address:
 525 NW 82ND COURT

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34482

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: CYNTHIA BATTISTI TD 10/14/2009