2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005543

FILED Jan 22, 2009 Secretary of State

Entity Name: LOGAN GATE VILLAGE HOMEOWNERS ASSOCIATION INC.

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

6806 WHITE CLIFFS WAY TAMPA, FL 33625

Current Mailing Address: New Mailing Address:

P. O. BOX 272911 P. O. BOX 272911 TAMPA, FL 33688 US

FEI Number: 59-3727311 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:

WRENN, MICHAEL L 6806 WHITE CLIFFS WAY TAMPA, FL 33625 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WRENN, MICHAEL L REV.
 Name:
 WRENN, MICHAEL L REV.

 Address:
 6806 WHITE CLIFFS WAY
 Address:
 6806 WHITE CLIFFS WAY

 City-St-Zip:
 TAMPA, FL 33625 US
 TAMPA, FL 33625 US

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

 Name:
 WILLIAMS, FRED
 Name:
 WILLIAMS III, FRED

 Address:
 12503 CARDIFF DRIVE
 Address:
 12503 CARDIFF DRIVE

Address: 12503 CARDIFF DRIVE Address: 12503 CARDIFF DRIVE
City-St-Zip: TAMPA, FL 33625
City-St-Zip: TAMPA, FL 33625 US

Title: SD () Delete Title: SD (X) Change () Addition Name: WRENN, DEANNA L Name: WRENN, DEANNA L

 Name:
 WRENN, DEANNA L
 Name:
 WRENN, DEANNA L

 Address:
 6806 WHITE CLIFFS WAY
 Address:
 6806 WHITE CLIFFS WAY

 City-St-Zip:
 TAMPA, FL 33625
 City-St-Zip:
 TAMPA, FL 33625 US

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

 Name:
 RUTH, MARLA
 Name:
 RUTH, MARLA L

 Address:
 12349 VILLAGER COURT
 Address:
 12349 VILLAGER COURT

 City-St-Zip:
 TAMPA, FL 33625
 City-St-Zip:
 TAMPA, FL 33625 US

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: MARLA L RUTH TD 01/22/2009