

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006793

FILED
Feb 12, 2009
Secretary of State

Entity Name: COUNTRYSIDE ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

C/O WELLINGTON MANAGEMENT, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

3461 B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

New Mailing Address:

C/O WELLINGTON MANAGEMENT, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

FEI Number: 65-1144896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, JOHN
C/O WELLINGTON MANAGEMENT, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 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: PD () Delete
Name: BAKER, STEPHEN
Address: 10443 OAK MEADOW LN
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: HALL, JUDITH
Address: 10178 OAK MEADOW LN
City-St-Zip: LAKE WORTH, FL 33467

Title: VPSD () Delete
Name: SEK, STEPHEN
Address: 4987 FOREST DALE DR
City-St-Zip: LAKE WORTH, FL 33467

Title: TD (X) Delete
Name: DEQUINO, DON
Address: 10150 OAK MEADOW LANE
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Delete
Name: MIOLA, ROBERT
Address: 10331 OAK MEADOW LANE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPSD (X) Change () Addition
Name: SEK, STEPHEN
Address: 4987 FOREST DALE DRIVE
City-St-Zip: LAKE WORTH, FL 33467

Title: TD (X) Change () Addition
Name: MIOLLA, ROBERT
Address: 10331 OAK MEADOW LANE
City-St-Zip: LAKE WORTH, FL 33467

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: STEPHEN BAKER

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date