

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007012

FILED
Apr 27, 2009
Secretary of State

Entity Name: EMILY'S WALK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3649058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRYAN
C/O SIGNATURE REALTY
4003 HARTLEY RD.
JACKSONVILLE, FL 32257 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: GALLIHER, SUSAN
Address: 1147 EMILY'S WALK LANE E
City-St-Zip: JACKSONVILLE, FL 32221

Title: VPD () Delete
Name: LUDWIG, SYLVIA
Address: 1087 VICTORY LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD () Delete
Name: FREITAS, ROBBIE
Address: 1032 MORNING STROLL LANE
City-St-Zip: JACKSONVILLE, FL 32221

Title: TD () Delete
Name: PEACOCK, NANCY
Address: 1110 EMILEY'S WALK LANE E
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: JOLLY, REGINALD
Address: 1041 EMILY'S WALK LANE E.
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: LAWRENCE, WILLIAM
Address: 9055 WANDER ABOUT CT.
City-St-Zip: JACKSONVILLE,, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROGERS, CINDY
Address: 1102 EVENING STROLL LN.
City-St-Zip: JACKSONVILLE, FL 32221

Title: SD (X) Change () Addition
Name: LUDWIG, SYLVIA
Address: 1087 VICTORY LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32221

Title: D (X) Change () Addition
Name: FREITAS, ROBBIE
Address: 1032 MORNING STROLL LANE
City-St-Zip: JACKSONVILLE, FL 32221

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

Title: VPD (X) Change () Addition
Name: JEFFERSON, GEARY
Address: 1139 EVENING STROLL LN.
City-St-Zip: JACKSONVILLE, FL 32221

Title: D (X) Change () Addition
Name: COYLE, GINA
Address: 1053 EMILYS WALK LANE E.
City-St-Zip: JACKSONVILLE,, FL 32221

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: CINDY ROGERS

PD

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date