2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000932

FILED Feb 09, 2009 Secretary of State

Entity Name: STAGECOACH RANCH ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: 5802 E QUICKSILVER CT. FLORAL CITY, FL 34436 US Current Mailing Address:				New Principal Place of Business: 11508 S BRIGHTSTAR AVE FLORAL CITY, FL 34436 US			
							New Mailing Address:
				4436 COMMERCIAL WAY SPRING HILL, FL 34606			
FEI Number:	02-0600163	FEI Number Applied For ()	FEI Number	Not Applic	able ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Na	me and A	Address of N	lew Registered Agent:	
ROBINSON & COMPANY, P.A. 4436 COMMERCIAL WAY SPRING HILL, FL 34606 US				ROBINSON & COMPANY, P.A. 4380 COMMERCIAL WAY SPRING HILL, FL 34606 US			
	named entity s e of Florida.	ubmits this statement for the	e purpose of ch	anging its	registered o	ffice or registered agent, or botl	
SIGNATUF	RE:					02/09/2009	
	Electroni	c Signature of Registered A	gent			Date	
OFFICERS	S AND DIRECT	ORS:	AD	DITIONS	/CHANGES	TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	D () PALMER, AMAN 4320 EDENROC SPRING HILL, F	K PL		ne: ress:	D (X) PALMER, AMAN 5803 E QUICKS FLORAL CITY,	SILVER CT	
Title: Name: Address: City-St-Zip:	D () DURRETT, HAR 7856 SADDLE C SARASOTA, FL	REEK TR.		ne: ress:	D (X) DURRETT, HAR 5750 E SWEET FLORAL CITY,	GRASS CT	
Fitle: Name: Address: City-St-Zip:	D () IOVANNISCI, JO 5802 E QUICKS FLORAL CITY, F	ILVER CT.			()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () FALSIA, JAMES 11370 S BRIGH FLORAL CITY, F	TSTAR AVE.			()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () FELICE, CHARM 11106 S BRIGH FLORAL CITY, F	TSTAR AVE.		ne: ress:	D (X) BISHOP, JOHN 5688 E SWEET FLORAL CITY,	GRASS CT	

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: AMANDA PALMER D 02/09/2009