2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# N02000001056

Entity Name: ALACHUA RANCH CLUB HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

535 PLANTERS MANOR WAY
BRADENTON, FL 34212

New Principal Place of Business:

Current Mailing Address:

535 PLANTERS MANOR
BRADENTON, FL 34212

New Mailing Address:

FEI Number: 03-0441810 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRAHAM, SUSAN R
535 PLANTERS MANOR WAY
BRADENTON, FL 34212 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: GRAHAM, SUSAN MRS.
Address: 535 PLANTERS MANOR WAY
City-St-Zip: BRADENTON, FL 34212

Title: COVP ( ) Delete
Name: BOSTON, JEFF MR.
Address: 1733 NW 39TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: STD ( ) Delete
Name: GRAHAM, HEATH A MR.
Address: 535 PLANTERS MANOR WAY
City-St-Zip: BRADENTON, FL 34212

Title: COVP ( ) Delete
Name: SHIRLEY, VILMORE E MR.
Address: 10561 SW 207TH STREET
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: SUSAN R. GRAHAM PRES 02/19/2009

Electronic Signature of Signing Officer or Director — Date