2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 19, 2008
Secretary of State

DOCUMENT# N02000002142

Entity Name: REGENCY HEIGHTS CO-OP, INC.

Current Principal Place of Business:

2550 STATE ROAD 580 EAST
LOT 138A
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2550 STATE ROAD 580 EAST
LOT 138A
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 01-0675395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASH, CAREY
2553 FIRST AVE N
SAINT PETERSBURG, FL 33733 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:	P	( ) Delete
Name:	MAUGERE, MICHAEL	
Address:	2550 STATE ROAD 580 LOT 152	
City-St-Zip:	CLEARWATER, FL 33761	
Title:	VP	( ) Delete
Name:	FREEDLAND, CHARLES D	
Address:	2550 STATE RD., 580, EAST LOT 267	
City-St-Zip:	CLEARWATER, FL 33761	
Title:	S	( ) Delete
Name:	HUPPMAN, JOAN Z	
Address:	2550 STATE RD., 580, EAST LOT 267	
City-St-Zip:	CLEARWATER, FL 33761	
Title:	T	( ) Delete
Name:	MEYER, MARGARET C	
Address:	2550 STATE ROAD 580 EAST LOT 441	
City-St-Zip:	CLEARWATER, FL 33761	
Title:	D	(X) Delete
Name:	RIMMLER, WILLIAM	
Address:	2550 STATE ROAD LOT 238	
City-St-Zip:	CLEARWATER, FL 33761	
Title:	D	(X) Delete
Name:	SITEK, JOSPEH F	
Address:	2550 STATE ROAD 580 EAST, LOT 425	
City-St-Zip:	CLEARWATER, FL 33761	

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:	T	(X) Change ( ) Addition
Name:	MEYER, MARGARET C	
Address:	2552 STATE ROAD 580	
City-St-Zip:	CLEARWATER, FL 33761	
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: MICHAEL MAUGERE P 09/19/2008

Electronic Signature of Signing Officer or Director — Date