2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002484

Apr 23, 2009 Secretary of State

Entity Name: WEYMOUTH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5844 OLD PASCO ROAD SUITE 100

WESLEY CHAPEL, FL 33544 US

New Mailing Address: Current Mailing Address:

5844 OLD PASCO ROAD SUITE 100

WESLEY CHAPEL, FL 33544 US

FEI Number: 33-1006514 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIZZETTA & COMPANY, INC. 5844 OLD PASCO ROAD SUITE 100 WESLEY CHAPEL, FL 33544 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete SEITZ, BOB Name:

3624 SIMONTON COURT Address: City-St-Zip: LAND O' LAKES, FL 34638 US

Title: () Delete

Name: PAASO, TOM Address: 3715 SIMONTON COURT City-St-Zip: LAND O' LAKES, FL 34638 US

Title: () Delete

JACKSON, JOHN Name: 19422 EVERTON PLACE Address: City-St-Zip: LAND O' LAKES, FL 34638 US

Title: () Delete

Name: LAFALCE, ELIZABETH Address: 19301 WEYMOUTH DRIVE City-St-Zip: LAND O' LAKES, FL 34638 US

(X) Change () Addition

PAASO, TOM Name:

Address: 3715 SIMONTON COURT City-St-Zip: LAND O' LAKES, FL 34638 US

(X) Change () Addition Title:

Name: RICHARDSON, VERN Address: 19121 WEYMOUTH DRIVE City-St-Zip: LAND O' LAKES, FL 34638 US

Title: (X) Change () Addition

KRESSLEY, LORI Name: Address: 19351 HASKELL PLACE City-St-Zip: LAND O' LAKES, FL 34638 US

(X) Change () Addition Title:

Name: VARGAS, CONNIE Address: 3725 SIMONTON COURT City-St-Zip: LAND O' LAKES, FL 34638 US

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: TOM PAASO Ρ 04/23/2009