

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006156

FILED
Apr 13, 2010
Secretary of State

Entity Name: RESERVE AT WOODMONT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVE NORTH, SUITE 1012
CLEARWATER, FL 33762

New Principal Place of Business:

C/O COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVENUE N SUITE 1012
CLEARWATER, FL 33762

Current Mailing Address:

C/O COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVE NORTH, SUITE 1012
CLEARWATER, FL 33762

New Mailing Address:

C/O COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVENUE N SUITE 1012
CLEARWATER, FL 33762

FEI Number: 16-0709428

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVE NORTH, SUITE 1012
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS
4585 140TH AVENUE N
SUITE 1012
CLEARWATER, FL 33762 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: KIRK BLISS

04/13/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: DIEVERT, BRIAN
Address: 13801 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: VP
Name: NEILAND, RICK
Address: 13801 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: S
Name: ALEXANDER, EARNEST
Address: 13720 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: D
Name: KOUTROUMANIS, JAMES
Address: 13810 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: D
Name: CORYDON, JEFF
Address: 13807 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

Title: D
Name: COX, JOHN
Address: 13806 SPRINGER LANE
City-St-Zip: TAMPA, FL 33625

I hereby 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 all other like empowered.

SIGNATURE: KIRK BLISS

MGR

04/13/2010

Electronic Signature of Signing Officer or Director

Date