

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02285

FILED
Jun 08, 2009
Secretary of State

Entity Name: DEVONWOOD COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

PROPERTY FIRST, INC
221 WALTON HEATH DRIVE
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

PROPERTY FIRST, INC
221 WALTON HEATH
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 59-2508554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PALMER, BETH
221 WALTON HEATH
ORLANDO, FL 32828 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: KOZOLOWSKI, KIP
Address: 7849 COPPERFIELD CT
City-St-Zip: ORLANDO, FL 32825

Title: VPD () Delete
Name: MARINARO, DAN
Address: 7804 WORTHAM COURT
City-St-Zip: ORLANDO, FL 32825

Title: SD (X) Delete
Name: SANTANA, MARILUZ
Address: 7835 WORTHAM
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: RAMSEY, KENNETH
Address: 714 ASHLEY COURT
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: BARKER, JOANNE
Address: 710 ASHLEY CT
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUDAKOZ, KIP
Address: 7849 COPPERFIELD CT
City-St-Zip: ORLANDO, FL 32825

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

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

Title: DS (X) Change () Addition
Name: RAMSEY, KENNETH
Address: 714 ASHLEY COURT
City-St-Zip: ORLANDO, FL 32825

Title: DT (X) Change () Addition
Name: BARKER, JOANNE
Address: 710 ASHLEY CT
City-St-Zip: ORLANDO, FL 32825

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: KIP HUDAKOZ

PD

06/08/2009

Electronic Signature of Signing Officer or Director

Date