2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N02828

Entity Name: CUMBERLAND FOREST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

644 CAPITAL CIR NE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 13089
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-2435959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RHINEHART, R S
644 CAPITAL CIR NE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

RHINEHART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: ROBERT S. RHINEHART 03/20/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: RHINEHART, ROBERT
Address: 644 CAPITAL CIR NE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete
Name: BRESNAHAN, MARK
Address: 1104 N GREENTREE CT
City-St-Zip: TALLAHASSEE, FL 32304

Title: P ( ) Delete
Name: MATHIS, JEANINE MS.
Address: 1103-B GREENTREE
City-St-Zip: TALLAHASSEE, FL 32304

Title: DS ( ) Delete
Name: LAWRENCE, JACQUELYN MS.
Address: 1101-G GREENTREE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: RHINEHART, ROBERT S
Address: 644 CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32301

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: ROBERT S. RHINEHART RA 03/20/2009
Electronic Signature of Signing Officer or Director Date