2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 30, 2009
Secretary of State

DOCUMENT# N03000006676

Entity Name: WESTSIDE TOWNHOMES PHASE 5 ASSOCIATION, INC.

Current Principal Place of Business:

1402 FETLER WAY
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 783334
WINTER GARDEN, FL 34778 US

New Mailing Address:

1402 FETLER WAY
WINTER GARDEN, FL 34787 US

FEI Number: 81-0627589 **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:

BELL, LOU ELLEN
1402 FETLER WAY
WINTER GARDEN, FL 34787 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: BELL, LOU ELLEN
Address: 1402 FETTLER WAY
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: V ( ) Delete
Name: PRIMROSE, PATRICIA
Address: 1070 DOLPHIN DR.
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: T ( ) Delete
Name: SHAW, RICHARD
Address: 1326 FETTLER WAY
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition
Name: BABB, GLYNIS U
Address: FETTLER WAY
City-St-Zip: WINTER GARDEN, FL 34787 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: LOU ELLEN BELL P 06/30/2009

Electronic Signature of Signing Officer or Director — Date