

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003589

FILED
Apr 30, 2009
Secretary of State

Entity Name: CHENEY WALK ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1731 NW 6TH STREET
SUITE A
GAINESVILLE, FL 32609

Current Mailing Address:

PO BOX 14506
GAINESVILLE, FL 32604

New Principal Place of Business:

1731 NW 6TH STREET
SUITE A
GAINESVILLE, FL 32609 US

New Mailing Address:

PO BOX 14506
GAINESVILLE, FL 32604 US

FEI Number: 59-3801023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTON BAUR/ED BAUR MANAGEMENT INC.
DBA FLORIDA COMMUNITY MANAGEMENT
1731 NW 6TH STREET SUITE A
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

ED BAUR MANAGEMENT, INC.
1731 NW 6TH STREET
STE A
GAINESVILLE, FL 32609 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: HAL WHITTET

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FOLEY, THOMAS
Address: 5216 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: STD () Delete
Name: SCHNEIDER, GARY
Address: 4437 SW 91ST DR
City-St-Zip: GAINESVILLE, FL 32608

Title: VD (X) Delete
Name: ROWE, ROBERT R
Address: 5300 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHNEIDER, GARY
Address: 4437 SW 91ST DRIVE
City-St-Zip: GAINESVILLE, FL 32608 US

Title: STD (X) Change () Addition
Name: DOUGLASS, MARC
Address: 7815 SW 19TH PLACE
City-St-Zip: GAINESVILLE, FL 32607 US

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: GARY SCHNEIDER

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date