2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006632

FILED Feb 09, 2009 Secretary of State

Entity Name: CLUBHOUSE HERITAGE PHASE II PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3421 STONEWAY DRIVE 102 PARK PLACE BLVD

LAKELAND, FL 33812 US SUITE D-2

KISSIMMEE, FL 34741 US

Current Mailing Address: New Mailing Address:

102 PARK PLACE BLVD, STE D-2 KISSIMMEE, FL 34741 US

FEI Number: 55-0874494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA ASSOCIATION MANAGEMENT, INC. FLORIDA ASSOCIATION MANAGEMENT, INC.

102 PARK PLACE BLVD C/O DOLLIE BOYD

STE D-2 102 PARK PLACE BLVD STE D-2

KISSIMMEE, FL 34741 US

KISSIMMEE, FL 34741 US

KISSIMMEE, FL 34741 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: 02/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 HOOBIN, SEAN
 Name:
 FRANCES, GINA

 Address:
 3465 HILSON DR
 Address:
 3502 STONE WAY DR

 City-St-Zip:
 LAKELAND, FL 33812 US
 City-St-Zip:
 LAKELAND, FL 33812

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 FRANCIS, GINA
 Name:
 MCCANTS, JERRI

 Address:
 3502 STONE WAY DR
 Address:
 3482 HILSON DRIVE

 City-St-Zip:
 LAKELAND, FL 33812 US
 City-St-Zip:
 LAKELAND, FL 33812

 $\label{eq:title:sde} \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{(X) Change () Addition}$

 Name:
 ORDRO, STEPHANIE
 Name:
 ORDRO, STEPHANIE

 Address:
 3420 STONEWAY DR
 Address:
 3420 STONEWAY DR

 City-St-Zip:
 LAKELAND, FL 33812 US
 City-St-Zip:
 LAKELAND, FL 33812

Title: DT (X) Delete Title: () Change () Addition

 Name:
 MCCANTS, GERALDYNE
 Name:

 Address:
 P.O. BOX 854
 Address:

 City-St-Zip:
 HIGHLAND CITY, FL 33846 US
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 PAULINO, GLEENIS
 Name:

 Address:
 3490 STONEWAY DR
 Address:

 City-St-Zip:
 LAKELAND, FL 33812
 City-St-Zip:

Title: DT (X) Delete Title: () Change () Addition

 Name:
 MCCANTS, GERABLYNE
 Name:

 Address:
 3482 HILSON DR
 Address:

 City-St-Zip:
 LAKELAND, FL 33812
 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: DOLLIE BOYD AGEN 02/09/2009