

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007899

FILED
Apr 23, 2009
Secretary of State

Entity Name: THE PRESERVE AT LAKE WASHINGTON SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2193 DRYDEN COURT
BOX 122
MELBOURNE, FL 32935

New Principal Place of Business:

3908 GARDENWOOD CIR
GRANT, FL 32949

Current Mailing Address:

2193 DRYDEN COURT
BOX 122
MELBOURNE, FL 32935

New Mailing Address:

PO BOX 100130
PALM BAY, FL 32910

FEI Number: 30-0282341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOCHWART, BRUCE
2235 CANOPY DR.
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

BAYSIDE MANAGEMENT SERVICES
3908 GARDENWOOD CIR
GRANT, FL 32949 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: SARA BERNIN, AGENT

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: DEVILLERS, RENE
Address: 2080 CANOPY DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: P () Delete
Name: GREENWADE, VINCENT
Address: 1900 CANOPY DR
City-St-Zip: MELBOURNE, FL 32901

Title: S () Delete
Name: LEIFERT, JASON
Address: 1935 CANOPY DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete
Name: PASTULA, JONATHAN
Address: 2325 CANOPY DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOCHWART, BRUCE
Address: 2235 CANOPY
City-St-Zip: MELBOURNE, FL 32935

Title: VP (X) Change () Addition
Name: FENCL, BRET
Address: 2310 CANOPY
City-St-Zip: MELBOURNE, FL 32901

Title: D (X) Change () Addition
Name: SCOTT, STEVE
Address: 2153 DRYDEN
City-St-Zip: MELBOURNE, FL 32935

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

Title: D () Change (X) Addition
Name: CHRISTESSON, RICHARD
Address: 2275 CANOPY
City-St-Zip: MELBOURNE, FL 32935

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: SARA BERNIN

AGNT

04/23/2009

Electronic Signature of Signing Officer or Director

Date