

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008474

FILED  
Jan 26, 2009  
Secretary of State

**Entity Name:** WALDEN PLACE ADDITION HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

644 A CAPITAL CIR SE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

7144 ATASCADERO LANE  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

PO BOX 13089  
TALLAHASSEE, FL 32317

**New Mailing Address:**

7144 ATASCADERO LANE  
TALLAHASSEE, FL 32317

**FEI Number:** 65-1249223

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RHINEHART, ROBERT S  
644 A CAPITAL CIR SE  
TALLAHASSEE, FL 32301 US

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

SHELBY, JENNIFER L  
7144 ATASCADERO LANE  
TALLAHASSEE, FL 32317 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: JENNIFER L. SHELBY

01/26/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: TURNER, DOUG  
Address: 508 A CAPITAL CIR SE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: O'REILLY, JOHN  
Address: 508 A CAPITAL CIR SE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: SAXON, FRED  
Address: 508 A CAPITAL CIR SE  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SANCHEZ, RODNEY  
Address: 2133 MONTEBELLO COURT  
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP (X) Change ( ) Addition  
Name: BRYANT, GARY  
Address: 7087 ATASCADERO LANE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S/T (X) Change ( ) Addition  
Name: SHELBY, JENNIFER L  
Address: 7144 ATASCADERO LANE  
City-St-Zip: TALLAHASSEE, FL 32317

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: JENNIFER L SHELBY

S/T

01/26/2009

Electronic Signature of Signing Officer or Director

Date