

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010448

FILED
Jan 07, 2008
Secretary of State

Entity Name: CARRIAGE HOUSES AT GLENVIEW PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3152 WILLOW BROOK LN
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

PO BOX 135
OXFORD, FL 34484

New Mailing Address:

FEI Number: 20-1848998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CIMMINO, ELENA
3152 WILLOW BROOK LN.
THE VILLAGES, FL 32162 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: PD () Delete
Name: ERICSON, JOHN
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

Title: VD () Delete
Name: DAVIS, MARILYN
Address: 3191 WILLOW BROOK LN.
City-St-Zip: LADY LAKE, FL 32162

Title: STD () Delete
Name: CIMMINO, ELENA
Address: 3152 WILLOW BROOK LN.
City-St-Zip: LADY LAKE, FL 32162

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, MARILYN
Address: 3191 WILLOW BROOK LANE
City-St-Zip: THE VILLAGES, FL 32162

Title: VD (X) Change () Addition
Name: FEENEY, MICHAEL
Address: 1502 WRESH WAY
City-St-Zip: THE VILLAGES, FL 32162

Title: STD (X) Change () Addition
Name: CIMMINO, ELENA
Address: 3152 WILLOW BROOK LN.
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Change (X) Addition
Name: LESTER, ROBERT
Address: 1504 WRESH WAY
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Change (X) Addition
Name: EEKHOF, HENDRICUS
Address: 1505 WRESH WAY
City-St-Zip: THE VILLAGES, FL 32162

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: ELENA CIMMINO

STD

01/07/2008

Electronic Signature of Signing Officer or Director

Date