

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004809

FILED  
Mar 06, 2009  
Secretary of State

**Entity Name:** CASCADES AT WORLD GOLF VILLAGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MAY MANAGEMENT  
5455 AIA SOUTH  
SAINT AUGUSTINE, FL 32080

**New Principal Place of Business:**

C/O MAY MANAGEMENT  
475 W TOWN PLACE SUITE 112  
SAINT AUGUSTINE, FL 32092

**Current Mailing Address:**

C/O MAY MANAGEMENT  
5455 AIA SOUTH  
SAINT AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 42-1702164      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MAY MANAGEMENT SERVICES INC  
5455 AIA SOUTH  
SAINT AUGUSTINE, FL 32080      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: P ( ) Delete  
Name: CARLO, ARTHUR  
Address: 1100 INVERNESS DR  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: VP ( ) Delete  
Name: FLEMING, FRANK  
Address: 1431 CASTLE PINES CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: S (X) Delete  
Name: DAVIDSON, MARY E  
Address: 1125 INVERNESS DR  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: T (X) Delete  
Name: CARR, JEAN  
Address: 633 COPPERHEAD CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: D ( ) Delete  
Name: DEMUYT, TOM  
Address: 1073 INVERNESS DR  
City-St-Zip: SAINT AUGUSTINE, FL 32092

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

Title: P (X) Change ( ) Addition  
Name: CARLO, ARTHUR  
Address: 5455 A1A S  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP (X) Change ( ) Addition  
Name: FLEMING, FRANK  
Address: 5455 A1A S  
City-St-Zip: SAINT AUGUSTINE, FL 32080

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

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

Title: D (X) Change ( ) Addition  
Name: DEMUYT, TOM  
Address: 5455 A1A S  
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: ARTHUR CARLO

P

03/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date