

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 30, 2009
Secretary of State

DOCUMENT# N05000005023

Entity Name: SWEETWATER BY DEL WEBB MASTER HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**9039 DEL WEBB PARKWAY
JACKSONVILLE, FL 32256**New Principal Place of Business:****Current Mailing Address:**9039 DEL WEBB PARKWAY
JACKSONVILLE, FL 32256**New Mailing Address:****FEI Number:** 65-1251086**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STERLING FIN. & MGMT., INC.
6620 SOUTHPOINT DR S
SUITE 610
JACKSONVILLE, FL 32216 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: GENOVESE, BILL
Address: 5210 BELFORT ROAD SUITE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: KIRK, BRAD
Address: 9241 SUNRISE BREEZE CT
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: LEECH, GARY
Address: 9140 SUGARLAND DR
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: BRAUN, CHRISTINE
Address: 5210 BELFORD RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: STD () Delete
Name: CLARK, GREGORY
Address: 5210 BELFORT RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLARK, GREGORY
Address: 5210 BELFORT ROAD SUITE 400
City-St-Zip: JACKSONVILLE, FL 32256

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

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

Title: SD (X) Change () Addition
Name: OLIVE, MATT
Address: 5210 BELFORT RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD (X) Change () Addition
Name: FITZPATRICK, DAN
Address: 5210 BELFORT RD STE 400
City-St-Zip: JACKSONVILLE, FL 32256

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: GREGORY CLARK

PD

07/30/2009

Electronic Signature of Signing Officer or Director

Date