

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005027

FILED
Apr 01, 2009
Secretary of State

Entity Name: GLENCAIRN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

914 CURLEW ROAD
SUITE 350
DUNEDIN, FL 34698

New Principal Place of Business:

410 BELTREES ST.
DUNEDIN, FL 34698

Current Mailing Address:

914 CURLEW ROAD
SUITE 350
DUNEDIN, FL 34698

New Mailing Address:

410 BELTREES ST.
DUNEDIN, FL 34698

FEI Number: 20-2841232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAVE, CARL A
914 CURLEW ROAD
SUITE 350
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

KRAVE, CARL A
410 BELTREES ST.
DUNEDIN, FL 34698 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:

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: KRAVE, CARL A
Address: 914 CURLEW ROAD, SUITE 350
City-St-Zip: DUNEDIN, FL 34698

Title: VSD () Delete
Name: KRAVE, JANET A
Address: 914 CURLEW ROAD, SUITE 350
City-St-Zip: DUNEDIN, FL 34698

Title: D () Delete
Name: KRAVE, KYLE E
Address: 914 CURLEW ROAD, SUITE 350
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: KRAVE, CARL A
Address: 410 BELTREES ST.
City-St-Zip: DUNEDIN, FL 34698

Title: VSD (X) Change () Addition
Name: KRAVE, JANET A
Address: 410 BELTREES ST.
City-St-Zip: DUNEDIN, FL 34698

Title: D (X) Change () Addition
Name: KRAVE, KYLE E
Address: 410 BELTREES ST.
City-St-Zip: DUNEDIN, FL 34698

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: CARL A. KRAVE

PTD

04/01/2009

Electronic Signature of Signing Officer or Director

Date