2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005667

FILED Apr 09, 2009 Secretary of State

Entity Name: LARKENHEATH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:				New Prince	New Principal Place of Business:		
	PASCO ROA	.D					
SUITE 100 VESLEY () CHAPEL, FL	33544	US				
Current Mailing Address:				New Maili	New Mailing Address:		
844 OLD	PASCO ROA	D					
SUITE 100			US				
	: 20-3018491		umber Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()		
			.,	• •	,,		
lame and	Address of	Current	Registered Agent:	Name and	Address of New Registered Agent:		
844 OLD SUITE 100	(& COMPAN) PASCO ROA) CHAPEL, FL	.Ď	JS				
	named entity of Florida.	submits	this statement for the p	urpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR	RE:						
	Electro	nic Sign	ature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
itle: lame: ddress: city-St-Zip:	P (GALETTA, LO 31810 BLYTH WESLEY CHA	EWOOD V		Title: Name: Address: City-St-Zip:	()Change ()Addition		
itle: lame: ddress: city-St-Zip:	VP (COMO, CHRIS 31816 BLYTH WESLEY CHA	EWOOD V		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition LIGHT, CHARLES 31811 BLYTHEWOOD WAY WESLEY CHAPEL, FL 33543 US		
itle: lame: .ddress: :ity-St-Zip:	T (WRIGHT, JAN 1139 BENSBF WESLEY CHA	ROOKE DE		Title: Name: Address: City-St-Zip:	T (X) Change () Addition WYETT, JANET 1139 BENSBROOKE DRIVE WESLEY CHAPEL, FL 33543 US		
itle: lame: .ddress: city-St-Zip:	D (KOMSKY, GE 31822 LARKE WESLEY CHA	NHEATH [Title: Name: Address: City-St-Zip:	S (X) Change () Addition CAFFYN, PETER C 31808 BLYTHEWOOD WAY WESLEY CHAPEL, FL 33543 US		
itle: lame: .ddress: city-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	D () Change (X) Addition GENTLE, SYLVIA 31818 BLYTHEWOOD WAY WESLEY CHAPEL, FL 33543 US		

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: LOUIS GALETTA P 04/09/2009