2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000008121

TI FILED

Oct 21, 2008

Secretary of State

Entity Name: WESTWOOD OF GROVELAND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

301 N US HWY 27 SUITE G 444 SEABREEZE BLVD

CLERMONT, FL 34711 645

DAYTONA BEACH, FL 32118

Current Mailing Address: New Mailing Address:

301 N US HWY 27 SUITE G 444 SEABREEZE BLVD

CLERMONT, FL 34711 645

DAYTONA BEACH, FL 32118

FEI Number: 65-1257329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GAMMON, FRANK M JR

301 N US HWY 27 SUITE G

MORBITZER, MARGARET L
444 SEABREEZE BLVD,

CLERMONT, FL 34711 US #645

DAYTONA BEACH, FL 32118 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: MARGARET L MORBITZER 10/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change () Addition

 Name:
 GAMMON, FM JR
 Name:
 RICH, ADAM T

 Address:
 301 N US HWY 27 SUITE G
 Address:
 111 COMPASS ROSE DR

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 GROVELAND, FL 34736

Title: DV () Delete Title: DS (X) Change () Addition

 Name:
 BEATY, F
 Name:
 HODGE, MINDY L

 Address:
 301 N US HWY 27 SUITE G
 Address:
 107 COMPASS ROSE DR

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 GROVELAND, FL 34736

Title: STD () Delete Title: DVP (X) Change () Addition

 Name:
 NORTHCUTT, S
 Name:
 JACKSON, STEVEN L

 Address:
 301 N US HWY 27 SUITE G
 Address:
 604 LAKE SUMNER DR

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 GROVELAND, FL 34736

Title: () Delete Title: DT () Change (X) Addition

 Name:
 Name:
 BRYAN, WILLIAM J

 Address:
 Address:
 542 LAKE SUMNER DR

 City-St-Zip:
 City-St-Zip:
 GROVELAND, FL 34736

Title: () Delete Title: DVP () Change (X) Addition

 Name:
 Name:
 WILLIS, VINCE E

 Address:
 Address:
 163 COMPASS ROSE DR

 City-St-Zip:
 City-St-Zip:
 GROVELAND, FL 34736

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: ADAM T RICH DP 10/21/2008