

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 25, 2009
Secretary of State

DOCUMENT# N05000008795

Entity Name: THE RESERVE AT PERSHING OAKS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4408 HECTOR CT.
ORLANDO, FL 32822**New Principal Place of Business:****Current Mailing Address:**4408 HECTOR CT.
ORLANDO, FL 32822**New Mailing Address:****FEI Number:** 20-3856921**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CESERY L. BULLARD, P.A.
112 NORTH SUMMERLIN AVENUE
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**BARBER, FRANK P
232 WILSHIRE BLVD
CASSELBERRY, FL 32707 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: FRANK PAUL BARBER

09/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAIRCLOTH, CAROLINA
Address: 4408 HECTOR COURT
City-St-Zip: ORLANDO, FL 32822

Title: VP () Delete
Name: TORRES, MADELINE
Address: 4408 HECTOR COURT
City-St-Zip: ORLANDO, FL 32822

Title: S () Delete
Name: BLANCO, REBECA
Address: 4408 HECTOR COURT
City-St-Zip: ORLANDO, FL 32822

Title: TR () Delete
Name: TAPIA, MIRIAM
Address: 4408 HECTOR COURT
City-St-Zip: ORLANDO, FL 32822

Title: A-TR () Delete
Name: MELENDEZ, JUANITA
Address: 4408 HECTOR COURT
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: CAROLINA FAIRCLOTH

P

09/25/2009

Electronic Signature of Signing Officer or Director

Date