

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012265

FILED
Apr 15, 2009
Secretary of State

Entity Name: COBBLESTONE HOMEOWNERS' ASSOCIATION OF ORANGE COUNTY, INC.

Current Principal Place of Business:

5955 T.G. LEE BLVD
SUITE 300
ORLANDO, FL 32822 US

New Principal Place of Business:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

Current Mailing Address:

5955 T.G. LEE BLVD
SUITE 300
ORLANDO, FL 32822 US

New Mailing Address:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

FEI Number: 20-4960216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGMENT
5955 T.G. LEE BLVD
SUITE 300
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

LELAND MANAGMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DOUGLAS, KIRK
Address: 342 COUNTRY COTTAGE LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VP () Delete
Name: LEITZINGER, GREG
Address: 401 COUNTRY COTTAGE LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S/T () Delete
Name: STEWART, ERIC
Address: 241 COUNTRY COTTAGE LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DOUGLAS, KIRK A
Address: 342 COUNTRY COTTAGE LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: VP (X) Change () Addition
Name: RIVERA, STEVEN M
Address: 308 BLACK SPRINGS LANE
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: S/T (X) Change () Addition
Name: STEWART, ERIC E
Address: 241 COUNTRY COTTAGE LANE
City-St-Zip: WINTER GARDEN, FL 34787 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: KIRK A. DOUGLAS

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date