## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001304

FILED Jan 24, 2009 Secretary of State

Entity Name: COURTYARD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1023 AVALON AVENUE 802 SAN CARLOS CT LADY LAKE, FL 32159 LADY LAKE, FL 32159 **Current Mailing Address: New Mailing Address:** P.O. BOX 2016 LADY LAKE, FL 32158 FEI Number: 20-4296192 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: DAVIS, NORAH D WILSON, EUGENE O 1023 ÁVALON AVENUE 802 SAN CARLOS CT US LADY LAKE, FL 32159 US LADY LAKE, FL 32159 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: EUGENE O. WILSON 01/24/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WILSON, EUGENE Name: Name: 802 SAN CARLOS CT Address: Address: City-St-Zip: LADY LAKE, FL 32159 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DELANEY, RICHARD Name: Name: FISHER, GEORGIA C Address: 804 ALVARADO PLACE Address: 1001 AVALON AVE City-St-Zip: LADY LAKE, FL 32159 City-St-Zip: LADY LAKE, FL 32159 Title: () Delete Title: (X) Change ( ) Addition DAVIS, NORAH D SMITH, JACK E Name: Name: 965 AVALON AVENUE Address: 1023 AVALON AVENUE Address: City-St-Zip: LADY LAKE, FL 32159 City-St-Zip: LADY LAKE, FL 32159 ( ) Change (X) Addition Title: () Delete Title: PERL, JOE F Name: Name: 805 LAS CRUCES CT Address: Address: City-St-Zip: City-St-Zip: LADY LAKE, FL 32159

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: EUGENE O. WILSON **PRES** 01/24/2009