

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 19, 2009
Secretary of State

DOCUMENT# N06000005571

Entity Name: OVIEDO FOREST MASTER HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1750 W. BRADWAY ST.
SUITE #220
OVIEDO, FL 32765 US**New Principal Place of Business:**6038 PINE VALLEY DRIVE
ORLANDO, FL 32819 US**Current Mailing Address:**PO BOX 620368
OVIEDO, FL 32765 US**New Mailing Address:**6038 PINE VALLEY DRIVE
ORLANDO, FL 32819 US**FEI Number:** 87-0794937**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVIS, KEVIN
1750 W. BROADWAY STREET
SUITE 220
OVIEDO, FL 32765 US**Name and Address of New Registered Agent:**ROBERTS, DANIEL
6038 PINE VALLEY DRIVE
ORLANDO, FL 32819 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: DANIEL ROBERTS

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: FRANKS, COLBY
Address: 11315 CORPORATE BLVD STE 250
City-St-Zip: ORLANDO, FL 32817 US

Title: P () Delete
Name: HAWKS, CANDICE
Address: 11315 CORPORATE BLVD STE 250
City-St-Zip: ORLANDO, FL 32817 US

Title: S/T () Delete
Name: GONZALEZ, ROLLIE
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTS, DANIEL
Address: 6038 PINE VALLEY DRIVE
City-St-Zip: ORLANDO, FL 32819 US

Title: VP (X) Change () Addition
Name: OLDSSEN, CYNTHIA
Address: 6038 PINE VALLEY DRIVE
City-St-Zip: ORLANDO, FL 32819 US

Title: S/T (X) Change () Addition
Name: MEADOWS, ROBERT
Address: 6038 PINE VALLEY DRIVE
City-St-Zip: ORLANDO, FL 32819 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: DANIEL ROBERTS

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date