2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004213

FILED Apr 09, 2009 Secretary of State

Entity Name: COURTYARDS AT REEDY CREEK CONDOMINIUM LASSOCIATION INC

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	DY CREEK BI EE, FL 34747	LVD		
Current Mailing Address:		New Mailing Address:		
	DY CREEK BI EE, FL 34747	LVD		
FEI Number	: 26-0798298	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
HEMANI, I 10939 WC		IDOLE		
ORLANDO	D, FL 32836	US		
The above	D, FL 32836	US	ourpose of changing its registere	ed office or registered agent, or both,
The above	D, FL 32836 e named entity e of Florida.	US	ourpose of changing its registere	ed office or registered agent, or both,
The above in the State	D, FL 32836 named entity e of Florida. RE:	US		ed office or registered agent, or both, Date
The above in the State SIGNATU	D, FL 32836 named entity e of Florida. RE:	US submits this statement for the part of the part of Registered Ag	ent	
The above in the State SIGNATUI OFFICER Title: Name: Address:	D, FL 32836 e named entity e of Florida. RE: Electro S AND DIRECTED HEMANI, NASI	us submits this statement for the price Signature of Registered Agentors:) Delete IR CHASE CIRCLE	ent	Date
The above in the State SIGNATU	PD (HEMANI, NASI 10939 WOOD ORLANDO, FL	submits this statement for the price of Registered Age CTORS:) Delete R CHASE CIRCLE . 32836) Delete TAF	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: NASIR HEMANI PD 04/09/2009