

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07936

FILED
Apr 10, 2009
Secretary of State

Entity Name: DALEHURST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WINSTON DR
COCOA, FL 32926 US

New Principal Place of Business:

Current Mailing Address:

2180 WINSTON DR
COCOA, FL 32926 US

New Mailing Address:

FEI Number: 59-2584855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEFFELFINGER, RICHARD
2000 JUNIPER DR
COCOA, FL 32926 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STURGES, MICHAEL
Address: 5190 DALEHURST DR
City-St-Zip: COCOA, FL 32926

Title: VPT () Delete
Name: RAPHAEL, RONALD
Address: 2135 DALE DR.
City-St-Zip: COCOA, FL 32926

Title: ST () Delete
Name: HEFFLLFINGER, RICHARD
Address: 2000 JUNIPER DR.
City-St-Zip: COCOA, FL 32926

Title: TT () Delete
Name: WALLER, PHILIP
Address: 2180 WINSTON DR
City-St-Zip: COCOA, FL 32926

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:

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: PHILIP L. WALLER

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04/10/2009

Electronic Signature of Signing Officer or Director

Date