2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N08000003953

Entity Name: NORTH LAKE WEIR COTTAGES ASSOCIATION, INC.

Current Principal Place of Business:

1553 SE FORT KING STREET
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

1553 SE FORT KING STREET
OCALA, FL 34471

New Mailing Address:

FEI Number: 26-2626990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOONE, KIRK
16 SOUTHEAST BROADWAY
OCALA, FL 34471 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: BOONE, KIRK
Address: 16 SOUTHEAST BROADWAY
City-St-Zip: OCALA, FL 34471

Title: VD ( ) Delete
Name: MCBRIDE, SANDY
Address: 1553 SE FORT KING STREET
City-St-Zip: OCALA, FL 34471

Title: STD ( ) Delete
Name: BOONE, JODI
Address: 16 SOUTHEAST BROADWAY
City-St-Zip: OCALA, FL 34471

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:

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 BOONE PD 03/23/2009

Electronic Signature of Signing Officer or Director — Date