

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004081

FILED
Jun 01, 2009
Secretary of State

Entity Name: FIDDLER BAYOU HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 S. PALM AVENUE PH
SARASOTA, FL 34236

New Principal Place of Business:

4300 HIGEL AVENUE
SARASOTA, FL 34242

Current Mailing Address:

500 S. PALM AVENUE PH
SARASOTA, FL 34236

New Mailing Address:

4300 HIGEL AVENUE
SARASOTA, FL 34242

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MELK, KAREN
500 S. PALM AVENUE PH
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

MELK, KAREN
4300 HIGEL AVENUE
SARASOTA, FL 34242 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: KAREN MELK

06/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIFFIN, WILLIAM D
Address: 4312 HIGEL AVENUE
City-St-Zip: SARASOTA, FL 34242

Title: VD () Delete
Name: PEIRCE, DAVID
Address: 4420 OCEAN BLVD.
City-St-Zip: SARASOTA, FL 34242

Title: STD () Delete
Name: MELK, KAREN
Address: 500 S. PALM AVENUE PH
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: MELK, KAREN
Address: 4300 HIGEL AVE.
City-St-Zip: SARASOTA, FL 34242

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: KAREN MELK

SCTY

06/01/2009

Electronic Signature of Signing Officer or Director

Date