

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10158

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** COUNTRY AIR ESTATES HOMEOWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

38130 MCDONALD ST.  
DADE CITY, FL 33525 US

**New Principal Place of Business:**

**Current Mailing Address:**

38130 MCDONALD ST.  
DADE CITY, FL 33525 US

**New Mailing Address:**

**FEI Number:** 07-6074105

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEEBURGER, DONALD  
38130 MCDONALD ST. #RV16  
DADE CITY, FL 33525 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: D ( ) Delete  
Name: SEEBURGER, DONALD  
Address: 38130 MCDONALD ST, RV 16  
City-St-Zip: DADE CITY, FL 33525

Title: DT ( ) Delete  
Name: FINCH, SHIRLEY  
Address: 38224 LEO ST  
City-St-Zip: DADE CITY, FL 33525

Title: DV ( ) Delete  
Name: FROST, JAMES  
Address: 38224 WILLIAMS AIRE ST  
City-St-Zip: DADE CITY, FL 33525

Title: DS ( ) Delete  
Name: LINBURG, JUDY  
Address: 38250 MARTIN ST  
City-St-Zip: DADE CITY, FL 33525

Title: D ( ) Delete  
Name: ENGLE, THOMAS  
Address: 38240 LEO ST  
City-St-Zip: DADE CITY, FL 33525

Title: D ( ) Delete  
Name: FOX, ALBERT  
Address: 38221 LEO ST  
City-St-Zip: DADE CITY, FL 33525

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KASEL, ROSEMARY  
Address: 38130 MCDONALD ST, RV 09  
City-St-Zip: DADE CITY, FL 33525

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: D (X) Change ( ) Addition  
Name: BRAIDWOOD, CHARLES  
Address: 101 LEO ST.  
City-St-Zip: DADE CITY, FL 33525

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: ROSEMARY KASEL

PRES

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date