2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# N11090

Entity Name: ARBOR COURT PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 2726
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

1661 N DOLTON PT
CRYSTAL RIVER, FL 34429

Current Mailing Address:

P.O. BOX 2726
CRYSTAL RIVER, FL 34429

New Mailing Address:

FEI Number: 59-2578877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, MARYBELLE
6018 W. BROMLEY CIR.
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

STOTTLER, LAUREN
1661 N DOLTON PT
CRYSTAL RIVER, FL 34429 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: LAUREN STOTTLER 02/02/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: WHEELER, JOHN
Address: 1728 N ENSIGN PT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete
Name: WILLIAM, DEXTER
Address: 6010 W DORSET DR
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: TD ( ) Delete
Name: BAKER, MARYBELLE
Address: 6018 W. BROMLEY CIR.
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete
Name: PHILLIPS, VIOLET
Address: 6048 W BROMLEY CIRCLE
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete
Name: LUTHER, CAROL
Address: 6034 W DORSET DR
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHAFER, RALPH
Address: 6040 W DEHAM TR
City-St-Zip: CRYSTAL RIVER, FL 34429

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

Title: TD (X) Change ( ) Addition
Name: STOTTLER, LAUREN
Address: 1661 N DOLTON PT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D (X) Change ( ) Addition
Name: VICK, LANE
Address: 6021 W DEHAM TR
City-St-Zip: CRYSTAL RIVER, FL 34429

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: LAUREN STOTTLER TREA 02/02/2009
Electronic Signature of Signing Officer or Director Date