

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11232

FILED
Feb 08, 2009
Secretary of State

Entity Name: TWIN LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7976 TWIN LAKE DRIVE
MILTON, FL 32583

New Principal Place of Business:

8016 TWIN LAKE DRIVE
MILTON, FL 32583 US

Current Mailing Address:

4883 GLOVER LANE
P O BOX 894
MILTON, FL 32572

New Mailing Address:

8016 TWIN LAKE DRIVE
MILTON, FL 32583 US

FEI Number: 59-2923616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCUTCHAN, GAIL
8016 TWIN LAKE DR
MILTON, FL 32583 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: VPD () Delete
Name: WACHOB, KENNETH
Address: 7816 OLD HICKORY HAMMOCK RD
City-St-Zip: MILTON, FL 32583 SR

Title: TDSD () Delete
Name: MCCUTCHAN, GAIL
Address: 8016 TWIN LAKE DR
City-St-Zip: MILTON, FL 32583

Title: PD () Delete
Name: LANEY, RONALD
Address: 7901 OLD HICKORY HAMMOCK RD
City-St-Zip: MILTON, FL 32583

Title: PD (X) Delete
Name: SIMPSON, RONNIE
Address: 7976 TWIN LAKE DRIVE
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WACHOB, KENNETH
Address: 7816 OLD HICKORY HAMMOCK RD
City-St-Zip: MILTON, FL 32583 SR

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

Title: VPD (X) Change () Addition
Name: ROLLO, CLINTON T
Address: 7916 TWIN LAKE DRIVE
City-St-Zip: MILTON, FL 32583

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: GAIL MCCUTCHAN

SD

02/08/2009

Electronic Signature of Signing Officer or Director

Date