2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N11446

Entity Name: COLONY DON PEDRO PHASES IV & V PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7025 PLACIDA ROAD
ENGLEWOOD, FL 34224

New Principal Place of Business:

Current Mailing Address:

7025-A PLACIDA RD
ATTN: ANNE MERRY
ENGLEWOOD, FL 34224

New Mailing Address:

FEI Number: 59-2678367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADDEN, ROBERT
7025 PLACIDA ROAD
ENGLEWOOD, FL 34224 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:	CANNON, RICK	
Address:	3103 GRASSLANDS DR	
City-St-Zip:	LAKELAND, FL 3303	
Title:	PD	( ) Delete
Name:	ROSS, JAMES A	
Address:	953 CHINOE ROAD	
City-St-Zip:	LEXINGTON, KY 40502	
Title:	TD	( ) Delete
Name:	HAWKINS, TED	
Address:	9006 CRESTMOOR DR	
City-St-Zip:	SAINT LOUIS, MO 63126	
Title:	D	(X) Delete
Name:	BOWMAN, ROBERT	
Address:	7485 MARGARET AVE	
City-St-Zip:	WEST OLIVE, MI 49460	
Title:	D	( ) Delete
Name:	TURNER, SARAH	
Address:	7473 30TH ST, SE	
City-St-Zip:	ADA, MI 49301	
Title:	D	( ) Delete
Name:	NICOLL, KEN	
Address:	P.O. BOX 772	
City-St-Zip:	PLACIDA, FL 33946	

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:	
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: TED HAWKINS TD 03/23/2009

Electronic Signature of Signing Officer or Director — Date