2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# N12023

Entity Name: COUNTRYSIDE AT WELLEBY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PROGRESSIVE MANAGEMENT ASSOCIATES, INC
5400 S UNIVERSITY DRIVE, SUITE 101
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

C/O PROGRESSIVE MANAGEMENT ASSOCIATES, INC
5400 S UNIVERSITY DRIVE, SUITE 101
DAVIE, FL 33328

New Mailing Address:

FEI Number: 59-2771164 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PROGRESSIVE MANAGEMENT ASSOCIATES, INC.
5400 S UNIVERSITY DRIVE
SUITE 101
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

BAUMAN, DAVID
4050 W BROWARD BOULEVARD
PLANTATION, FL 33317 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: DAVID M. BAUMAN 03/26/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: REPINSKI, NIDIA
Address: 5400 S UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: VPTD ( ) Delete
Name: TIERNEY, MICHAEL
Address: 5400 S UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

Title: TSD ( ) Delete
Name: RODRIGUEZ, GUSTAVO
Address: 5400 S UNIVERSITY DRIVE, SUITE 101
City-St-Zip: DAVIE, FL 33328

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:

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: JONATHAN LOUIS MGR 03/26/2009
Electronic Signature of Signing Officer or Director — Date