

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12828

FILED
Apr 11, 2009
Secretary of State

Entity Name: THE VILLAGE WEST OF CARROLLWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% MICHAEL T REICHARD
13930 N. DALE MABRY, SUITE 3
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

A.P. MCMILLAN
4650 WESTFORD CIRCLE
TAMPA, FL 33618 US

New Mailing Address:

FEI Number: 59-2993451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMILLAN, A P
4650 WESTFORD CIRCLE
TAMPA, FL 33618 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: PD () Delete
Name: MCMILLAN, A P
Address: 4650 WESTFORD CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: STD () Delete
Name: BALZER, GARY P
Address: 4602 WESTFORD CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: VD () Delete
Name: CHURAN, CLIFFORD
Address: 4656 WESTFORD CIRCLE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: CHUR CH, CLIFFORD
Address: 4656 WESTFORD CIRCLE
City-St-Zip: TAMPA, FL 33618

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: GARY P BALZER

STD

04/11/2009

Electronic Signature of Signing Officer or Director

Date