



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2008 8:00 am
Secretary of State

02-15-2008 90009 050 ****70.00

DOCUMENT # N17256 1. Entity Name COACHWOOD EAST HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business MARILYN A. DOUGLAS 718 W COACH N FOUR DR LEESBURG, FL 34748				Mailing Address MARILYN A. DOUGLAS 718 W COACH N FOUR DR LEESBURG, FL 34748	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02042008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-2807725	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent DOUGLAS, MARILYN A 718 WEST COACH N FOUR LEESBURG, FL 34748				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARILYN, DOUGLAS A <input checked="" type="checkbox"/> Delete 718 W. COACH N FOUR DR. LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SHOREY, LESTER <input type="checkbox"/> Delete 718 CARRIAGE LANE LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SPRINGER, ALFRED III, <input checked="" type="checkbox"/> Delete 713 CARRIAGE LN LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRANBERG, RACHEL F <input type="checkbox"/> Delete 803 COACH N FOUR LEESBURG, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD DEMUTH, JOY <input type="checkbox"/> Delete 1340 CONESTOGA LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ADAIR, LEWIS <input type="checkbox"/> Delete 2368 CONESTOGA LEESBURG, FL 34748				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPRINGER, ALFRED III <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 713 CARRIAGE LANE LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ATLEY, PATRICIA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 809 COACH N FOUR DR. LEESBURG, FL 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD COOKE, DAVID <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2342 CONESTOGA DR. LEESBURG, FL. 34748				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Alfred Springer III</u> 2/12/08 (352)-365-1968 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					