

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17707

FILED
Apr 19, 2009
Secretary of State

Entity Name: CROTON WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1992 THISTLE DRIVE
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 410825
MELBOURNE, FL 32941825 US

New Mailing Address:

FEI Number: 59-2824299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WYCKOFF, GENE
1992 THISTLE DRIVE
MELBOURNE, FL 32935 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: WYCKOFF, GENE
Address: 1992 THISTLE DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: TD () Delete
Name: SKOPAK, CHRIS
Address: 2064 THISTLE DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: SD () Delete
Name: PERSON, MONIQUE
Address: 1697 ATRIUM DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: DENO, MILTON
Address: 1975 BOTTLEBRUSH DRIVE
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: GORGONE, JOSEPH
Address: 2047 BOTTLEBRUSH DRIVE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: SKOPEK, CHRIS
Address: 2064 THISTLE DRIVE
City-St-Zip: MELBOURNE, FL 32935

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: CHRIS SKOPEK

TD

04/19/2009

Electronic Signature of Signing Officer or Director

Date