2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N18603

Entity Name: CARRIAGE HOMES OF WOODFIELD HUNT CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4379 NW 29TH WAY
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 810381
BOCA RATON, FL 334810381 US

New Mailing Address:

FEI Number: 65-0066990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVITT, DAVID
4379 NW 29TH WAY
BOCA RATON, FL 33434 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:	D	( ) Delete
Name:	SEAGO, KEITH	
Address:	4137 NW 29 WAY	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	D	( ) Delete
Name:	GLINERT, JANICE	
Address:	2976 NW 41 ST	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	TS	( ) Delete
Name:	GIBBONS, W J	
Address:	4398 N W 29TH WAY	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	P	( ) Delete
Name:	LEVITT, DAVID	
Address:	4379 NW 29 WAY	
City-St-Zip:	BOCA RATON, FL 33434	
Title:	D	( ) Delete
Name:	ROBICHAUD, JEAN	
Address:	4225 NW 29TH WAY	
City-St-Zip:	BOCA RATON, FL 33434	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	GIBBONS, W J	
Address:	4398 N W 29TH WAY	
City-St-Zip:	BOCA RATON, FL 33434	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	ROBICHAUD, JEAN	
Address:	4225 NW 29TH WAY	
City-St-Zip:	BOCA RATON, FL 33434	

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: W.J. GIBBONS T 01/16/2009

Electronic Signature of Signing Officer or Director — Date