

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18648

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** ROSE HILL PHASE III HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ROSE HILL III NEIGHBORHOOD  
ORLANDO, FL 32868 US

**New Principal Place of Business:**

ROSE HILL III NEIGHBORHOOD  
ORLANDO, FL 32818 US

**Current Mailing Address:**

P.O. BOX 460  
OCOOE, FL 34761 US

**New Mailing Address:**

**FEI Number:** 59-2772000      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SWOPE, WALTER  
9166 PRISTINE CIRCLE  
ORLANDO, FL 32818 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  
Name: ADAMS, ANTHONY  
Address: 9111 PRISTINE CIRCLE  
City-St-Zip: ORLANDO, FL 32818

Title: TRS  
Name: BAKER, CAROL  
Address: 9162 PRISTINE CIRCLE  
City-St-Zip: ORLANDO, FL 32818

Title: VP  
Name: BECKES, CHARLOTTE  
Address: 1124 RED DANDY DRIVE  
City-St-Zip: ORLANDO, FL 32818

Title: VP  
Name: SWOPE, WALTER  
Address: 9166 PRISTINE CIRCLE  
City-St-Zip: ORLANDO, FL 32818

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY ADAMS

PD

02/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date