

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18874

FILED
Mar 16, 2009
Secretary of State

Entity Name: AUGUSTA VILLAGE AT SUNTREE, INC.

Current Principal Place of Business:

6939 N WICKHAM ROAD
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

6939 N WICKHAM ROAD
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-2847720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, FRANCIS M CPA
6939 N. WICKHAM ROAD
MELBOURNE, FL 32940 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: P () Delete
Name: MILLER, DANIEL
Address: 587 DAWSON DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: T () Delete
Name: HARTZLER, ERNIE
Address: 593 DAWSON DR.
City-St-Zip: MELBOURNE, FL 32940

Title: P () Delete
Name: MILLER, DANIEL
Address: 587 DAWSON DR
City-St-Zip: MELBOURNE, FL 32940

Title: S () Delete
Name: GEHL, JEANNINE
Address: 611 DAWSON DR.
City-St-Zip: MELBOURNE, FL 32940

Title: VP (X) Delete
Name: SHARPE, PAUL
Address: 575 DAWSON DR.
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Delete
Name: FERRIS, SHIRLEY
Address: 669 GRIFFIN LANE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: LOUISE, JONES
Address: 624 DAWSON DR.
City-St-Zip: MELBOURNE, FL 32940

Title: VP (X) Change () Addition
Name: MORGAN, LESTER
Address: 629 DAWSON DR
City-St-Zip: MELBOURNE, FL 32940

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: DANIEL MILLER

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date