

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20477

FILED
Jan 30, 2009
Secretary of State

Entity Name: GOLDEN LAKES OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

610 A FALCONCREST E
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

610 A FALCONCREST E
PLANT CITY, FL 33565

New Mailing Address:

FEI Number: 59-2804692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWLEY, JAMES D
382 HUMMINGBIRD PL
PLANT CITY, FL 33565 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: OSBORN, PHIL
Address: 3 FALCONCREST E
City-St-Zip: PLANT CITY, FL 33565

Title: VPD () Delete
Name: DAVE, ALLEN
Address: 470 MORNING DOVE
City-St-Zip: PLANT CITY, FL 33565

Title: SD () Delete
Name: WASHBURN, DONNA
Address: 481 CHICKADEE CT
City-St-Zip: PLANT CITY, FL 33565

Title: SD () Delete
Name: BECKER, SALLY
Address: 456 FALCONCREST W
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: SARDO, CHUCK
Address: 566 PARTRIDGE PASS
City-St-Zip: PLANT CITY, FL 33565

Title: D () Delete
Name: BROWNING, SHELBY
Address: 429 HERON HOLLOW
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BERG, KENNETH
Address: 329 FALCON CREST
City-St-Zip: PLANT CITY, FL 33565

Title: VPD (X) Change () Addition
Name: SARDO, CHUCK
Address: 566 PARTRIDGE PASS
City-St-Zip: PLANT CITY, FL 33565

Title: SECY (X) Change () Addition
Name: WASHBURN, DONNA
Address: 481 CHICKADEE CT
City-St-Zip: PLANT CITY, FL 33565

Title: TRES (X) Change () Addition
Name: ZAISER, JACK
Address: 337 FALCON CREST
City-St-Zip: PLANT CITY, FL 33565

Title: D (X) Change () Addition
Name: OSBORN, PHILLIP
Address: 3 FALCON CREST
City-St-Zip: PLANT CITY, FL 33565

Title: D (X) Change () Addition
Name: ALLEN, DAVID
Address: 470 MORNING DOVE
City-St-Zip: PLANT CITY, FL 33565

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: DONNA WASHBURN

SECY

01/30/2009

Electronic Signature of Signing Officer or Director

Date