## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N21582

FILED Apr 27, 2009 Secretary of State

Entity Name: ENGLEWOOD PINES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1864 WHISPERING PINES CIRCLE 1869 WHISPERING PINES CIRCLE ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 **Current Mailing Address: New Mailing Address:** 1864 WHISPERING PINES CIRCLE 1869 WHISPERING PINES CIRCLE ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 FEI Number: 59-2474617 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMS, LAURIE B ESQ. 2815 PROCTOR ROAD SARASOTA, FL 34231 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BARTHELMEUS, JAY Name: Name: 1844 WHISPERING PINES CIRCLE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete ANDERSON, CRISTINE Name: MILLER, VIRGINIA Name: Address: 1818 WHISPERING PINES CIRCLE Address: 1869 WHISPERING PINES CIRCLE City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: () Delete Title: (X) Change ( ) Addition DUNN, KATHLEEN M DUNN, KATHLEEN M Name: Name: 1818 WHISPERING PINES CIRCLE 1864 WHISPERING PINES CIRCLE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: Title: () Change () Addition ( ) Delete SUGDEN, KEN Name: Name: 1844 WHISPERING PINES CIRCLE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: () Change () Addition COSTELLO, JAMES Name: Name: 1848 WHISPERING PINES CIR Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WITAK, BEVERLY BAKER, FRED Name: Name: Address: 1887 WHISPERING PINES CIR Address: 1805 WHISPERING PINES CIR ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 City-St-Zip: 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: VIRGINIA MILLER S 04/27/2009