2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22724

FILED Mar 29, 2009 Secretary of State

Entity Name: MARGAREE GARDENS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1927 BRANTLEY CIR 1969 BRANTLEY CIR CLERMONT, FL 34711 CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** P. O. BOX 121161 CLERMONT, FL 34712 US FEI Number: 59-2730937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOSKINSON, JANET L 1969 BRANTLEY CIR US CLERMONT, FL 34711 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 BERENS, ROBERT Name: Name: 1927 BRANTLEY CIR Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: () Change () Addition KAUFMAN, SCOTT Name: Name: Address: 1994 BRANTLEY CIR Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: (X) Change () Addition KUREEN, JENNIFER LUCAS, DAVID DR Name: Name: 1978 BRANTLEY CIRCLE 1962 BRANTLEY CIRCLE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 () Delete Title: Title: () Change () Addition Name: CUMMINGS, HAROLD Name: 1977 BRANTLEY CIR Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: () Change () Addition TURNER, RICHARD Name: Name: 1923 BRANTLEY CIR Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: () Change () Addition HOSKINSON, JANET L Name: Name: Address: 1969 BRANTLEY CIR Address: CLERMONT, FL 34711 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: JANET L HOSKINSON TREA 03/29/2009