2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24533

FILED Feb 25, 2009 Secretary of State

Entity Name: BUCKINGHAM HOMEOWNERS' ASSOCIATION OF POLK COUNTY, INC.

P O BOX 90594 5018 GREENBROOK LANE LAKELAND, FL 338047594 LAKELAND, FL 33811

Current Mailing Address: New Mailing Address:

P O BOX 90594 P O BOX 5284

LAKELAND, FL 338047594 LAKELAND, FL 33807

FEI Number: 59-2956002 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:

ANDERSON, BRUCE ELLIOTT, KAY F
1706 LADY BOWERS TRAIL 5018 GREENBROOK LANE
LAKELAND, FL 33809 US LAKELAND, FL 33811 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: KAY F ELLIOTT 02/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P ()Delete Title: DP (X)Change ()Addition

Name: GAGE, AL Name: MICKLE, BRYAN
Address: 1531 LITTLE JOHN'S TR Address: 1548 LITTLE JOHN TRAIL

Address: 1531 LITTLE JOHN'S TR Address: 1548 LITTLE JOHN TRAIL

City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809

Title: V () Delete Title: DVP (X) Change () Addition Name: REED, TAMMY Name: RUNYON, BRIEN

Address: 1821 LADY BOWERS TRL. Address: 1807 SIR GEORGE TRAIL
City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809

Title: T () Delete Title: DT (X) Change () Addition

 Name:
 ANDERSON, BRUCE
 Name:
 MANDISH, BRUCE

 Address:
 1706 LADY BOWERS TRAIL
 Address:
 1651 SIR HENRY'S TRAIL

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 LAKELAND, FL 33809

 Name:
 RODRIGUEZ, KATHY D
 Name:
 NYHOF, SUSAN

 Address:
 1637 LADY BOWERS TRAIL
 Address:
 7403 LOCKSEY LANE

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 LAKELAND, FL 33809

Title: () Delete Title: DVP () Change (X) Addition

 Name:
 Name:
 WADE, COLLEEN

 Address:
 Address:
 1804 LADY BOWERS TRAIL

 City-St-Zip:
 City-St-Zip:
 LAKELAND, FL 33809

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: BRYAN MICKLE DP 02/25/2009