

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25015

FILED
Jan 18, 2008
Secretary of State

Entity Name: PATIO HOMES OF WEST END COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

4400 NW 36TH AVENUE
GAINESVILLE, FL 32606 US

New Principal Place of Business:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

Current Mailing Address:

4400 NW 36TH AVENUE
GAINESVILLE, FL 32606 US

New Mailing Address:

5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 US

FEI Number: 59-3006285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPP, PAT
4400 NW 36TH AVENUE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

TRIPP, PAT
5208 SW 91ST DRIVE
SUITE D
GAINESVILLE, FL 32608 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:

01/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: DE PALMA, DANIEL
Address: 1041 NW 122 TERRACE
City-St-Zip: NEWBERRY, FL 32669

Title: SD () Delete
Name: ELLIOT, DONNA
Address: 12216 NW 9 LN
City-St-Zip: NEWBERRY, FL 32669

Title: TD () Delete
Name: GIBBONS, CAROL
Address: 12303 NW 7 LN
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: WILSON, HODGE
Address: 847 NW 122ND TERR
City-St-Zip: NEWBERRY, FL 32669

Title: PD () Delete
Name: SCHOLEFIELD, RED
Address: 12219 NW 9TH LANE
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: GEIGER, ROBERT
Address: 923 NW 122ND TERR
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHOLEFIELD, CLIFFORD
Address: 12219 NW 9TH LANE
City-St-Zip: NEWBERRY, FL 32669

Title: T (X) Change () Addition
Name: GIBBONS, CAROL
Address: 12303 NW 7TH LANE
City-St-Zip: NEWBERRY, FL 32669

Title: D (X) Change () Addition
Name: GRANT, THERON
Address: 12335 NW 8TH PLACE
City-St-Zip: NEWBERRY, FL 32669

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

Title: D (X) Change () Addition
Name: POLCZYNSKI, CLARICE
Address: 12338 NW 9TH LANE
City-St-Zip: NEWBERRY, FL 32669

Title: D (X) Change () Addition
Name: COARI, THOMAS
Address: 1027 NW 123RD WAY
City-St-Zip: NEWBERRY, FL 32669

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: CLIFFORD SCHOLEFIELD

P

01/18/2008

Electronic Signature of Signing Officer or Director

Date