

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25015

FILED
Apr 29, 2010
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-3006285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

MANAGEMENT SPECIALISTS SERVICES
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: SARAH CONNER, AGENT

04/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SCHOLEFIELD, CLIFFORD
Address: 12219 NW 9TH LANE
City-St-Zip: NEWBERRY, FL 32669

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

Title: S
Name: ELLIOT, DONNA C
Address: 12216 NW 9TH LANE
City-St-Zip: NEWBERRY, FL 32669

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

Title: P
Name: ENGH, DOUG
Address: 12332 NW 7TH LANE
City-St-Zip: NEWBERRY, FL 32669

Title: VP
Name: DREW, CHRIS
Address: 12324 NW 8TH PLACE
City-St-Zip: NEWBERRY, FL 32669

I hereby 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 all other like empowered.

SIGNATURE: DOUG ENGH

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date