

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25360

FILED
Apr 24, 2009
Secretary of State

Entity Name: PARKWOOD HOMEOWNERS ASSOCIATION OF WALDEN LAKE, INC.

Current Principal Place of Business:

4007 THACKERAY WAY
PLANT CITY, FL 33566 US

New Principal Place of Business:

409 E. COLLEGE AVENUE
RUSKIN, FL 33570 US

Current Mailing Address:

P.O. BOX 4438-0024
PLANT CITY, FL 33563 US

New Mailing Address:

P.O. BOX 1058
RUSKIN, FL 33575 US

FEI Number: 59-2875299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTHRIE, LAMONT
4007 THACKERY WAY
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

WILSON, LOU E
409 E. COLLEGE AVENUE
RUSKIN, FL 33570 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: LOU ELLEN WILSON

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAMONT, GUTHRIE
Address: 4007 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

Title: D () Delete
Name: PATE, BILLY
Address: 4021 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

Title: D () Delete
Name: RUSH, DAVE
Address: 4108 CONCORD WAY
City-St-Zip: PLANT CITY, FL 33566

Title: DT () Delete
Name: KANE, PATRICK
Address: 4017 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

Title: DS () Delete
Name: DUBE, BRUCE
Address: 4110 KIPLING AVENUE
City-St-Zip: PLANT CITY, FL 33566

Title: DT () Delete
Name: RIETHMAISER, THOMAS
Address: 4107 KIPLING AVENUE
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KANE, PATRICK
Address: 4017 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

Title: DVP (X) Change () Addition
Name: PATE, BILLY
Address: 4021 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

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

Title: D (X) Change () Addition
Name: BROWN, MIKE
Address: 4010 THACKERY WAY
City-St-Zip: PLANT CITY, FL 33566

Title: DS (X) Change () Addition
Name: RAINES, CATHLEEN
Address: 4102 KIPLING AVENUE
City-St-Zip: PLANT CITY, FL 33566

Title: DT (X) Change () Addition
Name: DEVEREAUX, DEBBIE
Address: 3216 PINE CLUB DRIVE
City-St-Zip: PLANT CITY, FL 33566

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: BILLY PATE

VP

04/24/2009

Electronic Signature of Signing Officer or Director

Date