

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25778

FILED
Jan 14, 2009
Secretary of State

Entity Name: PRESTWICK VILLAGE AT THE EAGLES, INC.

Current Principal Place of Business:

C/O DOUGHERTY & ASSOCIATES LLC
800 TARPON WOODS BLVD, F-4
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

C/O DOUGHERTY & ASSOCIATES LLC
800 TARPON WOODS BLVD, F-4
PALM HARBOR, FL 34685

New Mailing Address:

FEI Number: 59-2900630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOUGHERTY & ASSOCIATES, LLC
800 TARPON WOODS BLVD.
F-4
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SCOGGINS, TOM
Address: 16313 COLWOOD DR
City-St-Zip: ODESSA, FL 33556

Title: DT () Delete
Name: TURRELL, PETER
Address: 16307 COLWOOD DR
City-St-Zip: ODESSA, FL 33556

Title: DP () Delete
Name: ROBINSON, WAYNE
Address: 16313 BIRKDALE DR
City-St-Zip: ODESSA, FL 33556

Title: D (X) Delete
Name: FERRIN, TERI
Address: 16336 BIRKDALE DR
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BORCHERS, FRED
Address: 16312 COLWOOD DR
City-St-Zip: ODESSA, FL 33556

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

Title: DS (X) Change () Addition
Name: WUNSCH, PETER
Address: 16308 COLWOOD DR
City-St-Zip: ODESSA, FL 33556

Title: () Change () Addition
Name:
Address:
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: PETER TURRELL

DT

01/14/2009

Electronic Signature of Signing Officer or Director

Date