2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26131

FILED Jan 28, 2009 Secretary of State

Entity Name: CALOOSA LAKES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: 409 COLLEGE AVE E.				New Principal Place of Business:			
	EGE AVE E. FL 33570						
Current Mailing Address:				New Mailing Address:			
PO BOX 5 SUN CITY	5497 CENTER, FL	. 33571					
FEI Number	: 65-0097184	FEI Number Appl	ed For()	FEI Number Not Appl	icable ()	Certificate of Status Desired	() t
Name and	d Address of	Current Registere	ed Agent:	Name and	Address of	New Registered Agent:	
	LLEGE AVEN	UE JS					
	e named entity e of Florida.	submits this state	ment for the pur	pose of changing it	ts registered	l office or registered agent, o	or both,
SIGNATU	RE:						
	Electro	nic Signature of Re	egistered Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip:	MATHENY, RO 220 LINGER L			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	KELVER, GRA 219 LINGER L			Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	MCGOVERN, 1822 E. DEL \			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	ANDERSON, I 1816 DEL WE) Delete HAROLD BB BLVD, EAST NTER, FL 33573		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SUDMAN, JAÑ 1807 E. DEL N			Title: Name: Address: City-St-Zip:	SUDMAN, MA 1807 E. DEL	(X) Change () Addition ARVIN WEBB BLVD ENTER, FL 33573	

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: MARVIN SUDMAN P 01/28/2009