

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31621

FILED  
Jul 06, 2009  
Secretary of State

**Entity Name:** HOMEOWNERS OF LA CITA, PHASE II, INC.

**Current Principal Place of Business:**

3060 LA CITA LANE  
TITUSVILLE, FL 32780 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2095  
TITUSVILLE, FL 327812095 US

**New Mailing Address:**

**FEI Number:** 59-2949018      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

LEGG, STEVE  
3060 LA CITA LANE  
TITUSVILLE, FL 32780 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: PD ( ) Delete  
Name: LEGG, STEVE  
Address: 3060 LA CITA LANE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: VD ( ) Delete  
Name: LONG, JOE  
Address: 3000 LA CITA LANE  
City-St-Zip: TITUSVILLE, FL 32780

Title: SD ( ) Delete  
Name: SLATER, JOHN  
Address: 3040 LA CITA LANE  
City-St-Zip: TITUSVILLE, FL 32780

Title: TD ( ) Delete  
Name: SNODGRASS, LYNN  
Address: 645 LAKEWOOD LANE  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: D (X) Delete  
Name: FALLER, BOB  
Address: 3050 LA CITA LANE  
City-St-Zip: TITUSVILLE, FL 32780

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: TD (X) Change ( ) Addition  
Name: HUSKIN, HARRY  
Address: 770 LAKEWOOD LANE  
City-St-Zip: TITUSVILLE, FL 32780 US

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: HARRY HUSKIN

TD

07/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date