

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31882

FILED  
Jan 19, 2009  
Secretary of State

**Entity Name:** OVERLOOK ESTATES EAST PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 1773  
WINTER HAVEN, FL 338828773

**New Principal Place of Business:**

750 SANTA MARIA DR.  
WINTER HAVEN, FL 33884

**Current Mailing Address:**

P O BOX 1773  
WINTER HAVEN, FL 338828773

**New Mailing Address:**

**FEI Number:** 59-1779393      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

YATES, WILLIAM B  
750 SANTA MARIA DR  
WINTER HAVEN, FL 33884      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: P ( ) Delete  
Name: SEYMOUR, ANN  
Address: 702 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Delete  
Name: POWELL, JANE  
Address: 708 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: T ( ) Delete  
Name: YATES, WILLIAM B  
Address: 750 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: V ( ) Delete  
Name: WEIHRAUCH, BRAD  
Address: 748 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

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

Title: V (X) Change ( ) Addition  
Name: BROCK, DENNIS D  
Address: 746 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

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

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

Title: P (X) Change ( ) Addition  
Name: WEIHRAUCH, BRAD  
Address: 748 SANTA MARIA DR  
City-St-Zip: WINTER HAVEN, FL 33884

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: WILLIAM B YATES

T

01/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date