

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32642

FILED
Apr 19, 2009
Secretary of State

Entity Name: CROTON MEADOWS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

CROTON MEADOWS H/O ASSOC, INC.
PO BOX 362192
MELBOURNE, FL 32936 US

New Principal Place of Business:

CROTON MEADOWS H/O ASSOC, INC.
1832 WOODBERRY CIRCLE
MELBOURNE, FL 32936 US

Current Mailing Address:

CROTON MEADOWS H/O ASSOC, INC.
PO BOX 362192
MELBOURNE, FL 32936 US

New Mailing Address:

FEI Number: 59-3011973 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PIERCE IV, DANIEL C
1833 WOODBERRY CIRCLE
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

BLAKE, STEVEN
1832 WOODBERRY CIRCLE
MELBOURNE, FL 32935 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: STEVEN BLAKE

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BLAKE, STEVEN
Address: 1832 WOODBERRY CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: PD () Delete
Name: PIERCE IV, DANIEL C
Address: 1833 WOODBERRY CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: TD () Delete
Name: WORKS, SHIRLEY
Address: 1820 WOODBERRY CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: ATD () Delete
Name: BARHOLD, CAROL
Address: 1912 GLEN MEADOWS CIR
City-St-Zip: MELBOURNE, FL 32935

Title: AD () Delete
Name: PATERAKIS, CINDY
Address: 1904 GLEN MEADOWS CIRCLE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BLAKE, STEVEN
Address: 1832 WOODBERRY CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: VPD (X) Change () Addition
Name: VALENTE, RICHARD V
Address: 1926 GLEN MEADOWS CIRCLE
City-St-Zip: MELBOURNE, FL 32935

Title: TD (X) Change () Addition
Name: VALENTE, KATHY A
Address: 1926 GLEN MEADOWS CIRCLE
City-St-Zip: MELBOURNE, FL 32935

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

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: STEVEN BLAKE

PD

04/19/2009

Electronic Signature of Signing Officer or Director

Date