

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34425

FILED
May 30, 2009
Secretary of State

Entity Name: ARLINGTON WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10836 CLAVERTON AVENUE
HUDSON, FL 34667

New Principal Place of Business:

18615 ROYAL CT.
HUDSON, FL 34667

Current Mailing Address:

P O BOX 3789
SPRING HILL, FL 346113789

New Mailing Address:

FEI Number: 51-3494664 **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:

BURKE, MARIE
18851 GREEN PARK RD
HUDSON, FL 34667 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: DV () Delete
Name: LINDSEY, BILL
Address: 10836 CLEVERTON AVENUE
City-St-Zip: HUDSON, FL 34667

Title: DVP () Delete
Name: DIETZ, WILLIAM
Address: 18478 QUITE LANE
City-St-Zip: HUDSON, FL 34667

Title: DS () Delete
Name: DERING, JOHN
Address: 18615 ROYAL CT,
City-St-Zip: HUDSON, FL 34667

Title: DT () Delete
Name: BURKE, MARIE
Address: 18851 GREEN PARK RD.
City-St-Zip: HUDSON, FL 34667

Title: D () Delete
Name: SEARPETTI, DENNIS
Address: 18604 ROYAL CT
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LINDSEY, BILL
Address: 10836 CLEVERTON AVENUE
City-St-Zip: HUDSON, FL 34667

Title: T (X) Change () Addition
Name: DIETZ, WILLIAM
Address: 18478 QUITE LANE
City-St-Zip: HUDSON, FL 34667

Title: S (X) Change () Addition
Name: DERING, JOHN
Address: 18615 ROYAL CT,
City-St-Zip: HUDSON, FL 34667

Title: VP (X) Change () Addition
Name: BURKE, MARIE
Address: 18851 GREEN PARK RD.
City-St-Zip: HUDSON, FL 34667

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: WILLIAM DIETZ

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05/30/2009

Electronic Signature of Signing Officer or Director

Date