

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36217

FILED
Apr 16, 2009
Secretary of State

Entity Name: SEMINOLE EAGLES LANDING HOMEOWNERS ASSOC., INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-3071439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: MEEKS, CHARLOTTE
Address: 1188 CLINGING VINE PL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD () Delete
Name: GHALI, MIKE
Address: 1201 CLINGING VINE PL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: TSD () Delete
Name: MEEKS, DOUG
Address: 1188 CLINGING VINE PL
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: BURGMON, RINC
Address: 5622 CATSKILL CT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: LOMBARDI, NINA
Address: 5647 CATSKILL CT
City-St-Zip: WINTER SPRINGS, FL 32708

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: () 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: CHARLOTTE MEEKS

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date