

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37355

FILED
Apr 06, 2007
Secretary of State

Entity Name: GLENWOOD HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

PMB 345 4250 ALAFAYA TRL STE 212
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

PMB 345 4250 ALAFAYA TRL STE 212
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3046425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNSIDE, LILLY
C/O RELIABLE PROPERTY MGRS
PMB 345 4250 ALAFAYA TRL STE 212
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

RELIABLE PROPERTY MANAGERS
4250 ALAFAYA TRAIL
SUITE 212-345
OVIEDO, FL 32765 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: CURTIS BURNSIDE

04/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENSON, TAMMY
Address: 10735 HARKWOOD BLVD.
City-St-Zip: ORLANDO, FL

Title: T () Delete
Name: COWDEN, KAREN
Address: 10826 HARKWOOD BLVD
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: TAMMY BENSON

P

04/06/2007

Electronic Signature of Signing Officer or Director

Date