2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# N44762

Entity Name: ST. LUCIE GARDENS HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

4200 S.E. HOME WAY
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

4200 S.E. HOME WAY
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number: 65-0728395 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, ESQ. D
759 S. FEDERAL HIGHWAY
SUITE 212
STUART, FL 34994 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: BRAVO, RAY
Address: 7308 S.E. BRITTNEY CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: VPD ( ) Delete
Name: HOWARD, JOHN
Address: 4293 SE BRITTANY CIR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: SD ( ) Delete
Name: MAJOROS, ROBERT
Address: 4282 SE BRITTANY CIR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD ( ) Delete
Name: KNEUT, KENNETH
Address: 4257 SE HOME WAY
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: 2VPD ( ) Delete
Name: MARSHALL, LOUIS
Address: 4280 SE BRITTANY CIR
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: O'HARA, BARBARA
Address: 4216 SE HOME WAY
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: SD (X) Change ( ) Addition
Name: HOWARD, JOHN
Address: 4293 SE BRITTANY CIR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: VPD (X) Change ( ) Addition
Name: MUNSON, HOWARD
Address: 4285 SE BRITTANY CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

Title: D (X) Change ( ) Addition
Name: MARSHALL, LOUIS
Address: 4280 SE BRITTANY CIR
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: BARBARA O'HARA PRES 01/28/2009

Electronic Signature of Signing Officer or Director — Date