2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47915

FILED Mar 30, 2009 Secretary of State

Entity Name: WESTBURY LANDOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2758 WESTBURY CIRCLE TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

2758 WESTBURY CIRCLE

TALLAHASSEE, FL 32303 US

FEI Number: 59-3164914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUNN, CYNTHIA A TREASUR 2758 WESTBURY CIRCLE TALLAHASSEE, FL 32303 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: TREA (X) Change () Addition

Name: GUNN, CYNTHIA Name: GUNN, CYNTHIA A
Address: 2758 WESTBURY CIRCLE Address: 2758 WESTBURY CIRCLE
City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

Title: () Delete Title: PRES (X) Change () Addition JOANN, TOMLINSON PRESIDE Name: Name: TIMOTHY, FRIZZELL M PRESIDE Address: 3839 MCFARLANE DRIVE Address: 2808 MCFARLANE COURT City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303

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: CYNTHIA A GUNN TREA 03/30/2009