

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49253

FILED
Feb 10, 2009
Secretary of State

Entity Name: TEMPLE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8555 125TH CT. NORTH
SEMINOLE, FL 33776 US

New Principal Place of Business:

8555 125TH CT. NORTH
SEMINOLE, FL 337763200 US

Current Mailing Address:

8555 125TH CT. NORTH
SEMINOLE, FL 33776 US

New Mailing Address:

8555 125TH CT. NORTH
SEMINOLE, FL 337763200 US

FEI Number: 59-3132410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LADD, RONALD R
8555 125TH CT N
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

LADD, RONALD R
8555 125TH CT N
SEMINOLE, FL 337763200 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: RONALD R LADD

02/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: KOTCHMAN, SUSAN C
Address: 8442-125 COURT N.
City-St-Zip: SEMINOLE, FL 33776

Title: PD () Delete
Name: STALKER, JOHN
Address: 8464 125TH CT N
City-St-Zip: SEMINOLE, FL 33776

Title: VD () Delete
Name: IVY, LEIGHT
Address: 8508 125TH CT N
City-St-Zip: SEMINOLE, FL 33776

Title: TD () Delete
Name: LADD, RONALD
Address: 8555 125TH CT N
City-St-Zip: SEMINOLE, FL 33776

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:

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: RONALD R. LADD

TRES

02/10/2009

Electronic Signature of Signing Officer or Director

Date