

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50059

FILED
Jan 15, 2009
Secretary of State

Entity Name: THE RESERVE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1420 S FLORIDA AVE
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5400
LAKELAND, FL 338075400 US

New Mailing Address:

FEI Number: 59-3135078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARPER, ROBERT F III
208 WEST ALAMO DRIVE
LAKELAND, FL 33813 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: HARPER, ROBERT F III
Address: 208 W ALAMO DR
City-St-Zip: LAKELAND, FL

Title: VD () Delete
Name: ELLSWORTH, W W JR
Address: 208 W ALAMO DR
City-St-Zip: LAKELAND, FL

Title: STD () Delete
Name: ANDERSON, BOBBIE J.,
Address: 208 WEST ALAMO DRIVE
City-St-Zip: LAKELAND, FL

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:

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: ROBERT F HARPER III

DP

01/15/2009

Electronic Signature of Signing Officer or Director

Date