

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005596

FILED  
Mar 23, 2010  
Secretary of State

**Entity Name:** DEVONSHIRE LAKES HOME OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

8359 BEACON BLVD.  
313  
FORT MYERS, FL 33907 US

**Current Mailing Address:**

8359 BEACON BLVD.  
313  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

8359 BEACON BLVD.  
SUITE 313  
FORT MYERS, FL 33907 US

**New Mailing Address:**

8359 BEACON BLVD.  
SUITE 313  
FORT MYERS, FL 33907 US

**FEI Number:** 65-0460317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYDEN, KENNETH W  
8359 BEACON BLVD.  
313  
FT. MYERS, FL 33907 US

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

HAYDEN & ASSOCIATES  
8359 BEACON BLVD.  
SUITE 313  
FT. MYERS, FL 33907 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: KENNETH W. HAYDEN

03/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KILPATRICK, DON  
Address: 12854 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: VP  
Name: BROWN, GARY  
Address: 12867 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: T  
Name: YOUNGBLOOD, BARBARA  
Address: 12877 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: S  
Name: WALAT, ALICE  
Address: 12746 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

Title: D  
Name: GOLDENBERG, SHELLY  
Address: 12878 DEVONSHIRE LAKES CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

I hereby 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 all other like empowered.

SIGNATURE: DON KILPATRICK

P

03/23/2010

Electronic Signature of Signing Officer or Director

Date