

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001978

FILED
Apr 27, 2009
Secretary of State

Entity Name: CUMBERLAND FOREST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4003 HARTLEY ROAD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

4003 HARTLEY ROAD
JACKSONVILLE, FL 32257 US

New Mailing Address:

FEI Number: 59-3247695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTRELL, BRYAN K
4003 HARTLEY ROAD
JACKSONVILLE, FL 32257 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: ALEKSIC, RAY
Address: 5370 CUMBERLAND FOREST LANE
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD () Delete
Name: CROSSMAN, CHRIS
Address: 9012 BLALOCK CT.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: TEMJA, RAMAZAN
Address: 9017 CUMBERLAND FOREST WAY
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: MCARTHUR, STEPHANIE
Address: 9031 BLALOCK CT
City-St-Zip: JACKSONVILLE, FL 32257

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: RAY ALEKSIC

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date