2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002042

FILED Apr 09, 2009 Secretary of State

Entity Name: SOUTHVIEW OF COUNTRYWAY HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 **Current Mailing Address: New Mailing Address:** 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 FEI Number: 59-3248507 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: DUARTE, ANTONIO 6221 LAND O' LAKES BLVD LAND O' LAKES, FL 34638 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: () Delete () Change () Addition ESSEFF, PETER Name: Name: 11415 GEORGETOWN CR. Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: BOGOVIC, MICHAEL Name: Address: 11307 GEORGETOWN CR. Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: Title: () Delete Title: () Change () Addition GIBSON, LISA Name: Name: 11303 GEORGETOWN CIR Address: Address: City-St-Zip: TAMPA, FL 33635 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: DAPHINE WILSON LCAM 04/09/2009