2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# N94000005679

Entity Name: COUNTRYSIDE WEST PUD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O KAREN KOCH INC.
6156 SABAL POINT CIRCLE
PORT ORANGE, FL 32129 US

New Principal Place of Business:

Current Mailing Address:

C/O KAREN KOCH INC
PO BOX 291282
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-3281313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOCH, KAREN
6156 SABAL POINT CIR
PORT ORANGE, FL 32128 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
Name: MCKENZIE, BARBARA
Address: 5784 FALLING TREE LANE
City-St-Zip: PORT ORANGE, FL 32127

Title: STD
Name: WALKER, GLEN
Address: 5782 FALLING TREE LANE
City-St-Zip: PORT ORANGE, FL 32127

Title: VPD
Name: LANDRY, JACKIE
Address: 962 COUNTRYSIDE WEST BLVD
City-St-Zip: PORT ORANGE, FL 32127

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: BARBARA MCKENZIE PD 01/06/2010
Electronic Signature of Signing Officer or Director Date