

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005840

FILED
Mar 31, 2008
Secretary of State

Entity Name: THE WESTOVER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4497 WESTOVER DRIVE
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

4244 W TENNESSEE STREET
SUITE #182
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 59-3384113 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WIGGINS, VANCE
4497 WESTOVER DRIVE
TALLAHASSEE, FL 32303 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: WIGGINS, VANCE
Address: 4497 WESTOVER DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VP () Delete
Name: CLARK, JAMES
Address: 4533 WESLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: TD () Delete
Name: CLARK, LYDIA
Address: 4533 WESLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SD () Delete
Name: JOHNSON, SHERRI
Address: 2104 WESLEY CT
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SD () Delete
Name: POMPEY, ANNETTE
Address: 4449 WESTOVER DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: AR (X) Delete
Name: HATCHER, MICHELLE
Address: 2116 WESLEY CT
City-St-Zip: TALLAHASSEE, FL 32303 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR (X) Change () Addition
Name: CLARK, LYDIA
Address: 4533 WESLEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SC (X) Change () Addition
Name: JOHNSON, SHERRI
Address: 2104 WESLEY CT
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SC (X) Change () Addition
Name: POMPEY, ANNETTE
Address: 4449 WESTOVER DRIVE
City-St-Zip: TALLAHASSEE, FL 32303 US

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: VANCE C WIGGINS

PD

03/31/2008

Electronic Signature of Signing Officer or Director

Date