2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N95000000089

Entity Name: PAVILION PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3330 MANOR COVE
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

PO BOX 1058
RUSKIN, FL 33575

New Mailing Address:

FEI Number: 59-0711505 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, LOU E
409 E. COLLEGE AVE
RUSKIN, FL 33570 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: DS ( ) Delete
Name: TAYLOR, BARRY
Address: 9236 HIDDEN WATER
City-St-Zip: RIVERVIEW, FL 33569

Title: DS ( ) Delete
Name: VASQUEZ, JAME'
Address: 9209 WATERBIRD DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete
Name: MORRIS, JOE
Address: 3714 BALLEWATER BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: DT ( ) Delete
Name: LECKEIC, MARTIN
Address: 9236 ESTATE COVE CIR
City-St-Zip: RIVERVIEW, FL 33569

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: TAYLOR, BARRY
Address: 9236 HIDDEN WATER
City-St-Zip: RIVERVIEW, FL 33569

Title: VP (X) Change ( ) Addition
Name: BAGSHAW, JUDITH
Address: 9003 EGRET COVE
City-St-Zip: RIVERVIEW, FL 33569

Title: DS (X) Change ( ) Addition
Name: ANDERSON, TOM
Address: 3704 BELLEWATER BLVD
City-St-Zip: RIVERVIEW, FL 33569

Title: DT (X) Change ( ) Addition
Name: LECLERC, MARTIN
Address: 9236 ESTATE COVE CIR
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Change (X) Addition
Name: MURPHY, PATTY
Address: 4019 WATER COVE CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

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: BARRY TAYLOR P 04/24/2009

Electronic Signature of Signing Officer or Director — Date