

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003187

FILED
Apr 26, 2009
Secretary of State

Entity Name: VALLEY VIEW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9908 QUIET LANE
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

9908 QUIET LANE
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 59-3327152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIVIANI, JAMES
9715 QUIET LANE
WINTER GARDEN, FL 34787 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: VD () Delete
Name: WIMBERLY, DAVID
Address: 8718 QUIET LN
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: VIVIANI, JAMES
Address: 9715 QUIET LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: PD () Delete
Name: CONNER, MARK
Address: 9437 QUIET LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: TD () Delete
Name: BARNARD, RUPERT
Address: 9313 QUIET LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD () Delete
Name: SLATER, ELIZABETH
Address: 9545 QUIET LN
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: WIMBERLY, DAVID
Address: 8718 QUIET LN
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD (X) Change () Addition
Name: VIVIANI, JAMES
Address: 9715 QUIET LANE
City-St-Zip: WINTER GARDEN, FL 34787

Title: D (X) Change () Addition
Name: CONNER, MARK
Address: 9437 QUIET LANE
City-St-Zip: WINTER GARDEN, FL 34787

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

Title: PD (X) Change () Addition
Name: SLATER, ELIZABETH
Address: 9545 QUIET LN
City-St-Zip: WINTER GARDEN, FL 34787

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: RUPERT BARNARD

TD

04/26/2009

Electronic Signature of Signing Officer or Director

Date