

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAR -6 PM 3:00

DOCUMENT # N95000005298

1. Entity Name
GLENEAGLES AT LOMOND HILLS HOMEOWNERS
ASSOCIATION, INC.



Principal Place of Business
7667 VICTORY LANE
DELRAY BEACH, FL 33446 US

Mailing Address
7667 VICTORY LANE
DELRAY BEACH, FL 33446 US



08062008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0773151

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEYER, DAVID
16081 LOMOND HILLS TR.
DELRAY BEACH, FL 33446

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David E. Meyer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-25-09

DATE

Filing Fee is \$61.25
Due by September 12, 2008
MAY 01, 2009

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BENEDON, IRVING 16049 LOMOND HILLS TR DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CHAIKIN, BOBBIE 16113 LOMOND HILLS TR DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MEYER, DAVID 16081 LOMOND HILLS TR. DELRAY BEACH, FL 33446
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

800145146428
03/06/09--01027--002 **61:25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David E. Meyer DAVID E. MEYER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-09

Date

216-765-8810

561-495-9798

Daytime Phone #