

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005363

FILED
Apr 20, 2009
Secretary of State

Entity Name: PERSHING HEIGHTS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3122 CATHERINE WHEEL CT.
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

3122 CATHERINE WHEEL CT.
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 59-3376660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONTKO, BERNARD C
3122 CATHERINE WHEEL CT.
ORLANDO, FL 32822 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: P () Delete
Name: GONTKO, BERNARD C
Address: 3122 CATHERINE WHEEL CT.
City-St-Zip: ORLANDO, FL 32822

Title: VP () Delete
Name: HUFFMIRE, SCOTT
Address: 3123 CATHERINE WHEEL CT.
City-St-Zip: ORLANDO, FL 32822

Title: T () Delete
Name: LONGWORTH, GLORIA M
Address: 3118 CHATHERINE WHEEL CT
City-St-Zip: ORLANDO, FL 32822

Title: S () Delete
Name: SALZANO, JOHN
Address: 3126 CATHERINE WHEEL CT
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: MOLINA, LYMARIE
Address: 3107 CATHERINE WHEEL CT
City-St-Zip: ORLANDO, FL 32822

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: BERNARD C. GONTKO

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date