2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000920

FILED Mar 01, 2009 Secretary of State

Entity Name: BLOOMINGDALE VILLAGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1383 OAKFIELD DR

BRANDON, FL 33511 US

Current Mailing Address: New Mailing Address:

1383 OAKFIELD DR

BRANDON, FL 33511 US

FEI Number: 59-3364854 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEFURO, JAMES R P.A.
201 E KENNEDY BLVD
SUITE 1460
TAMPA, FL 33602 US

DE FURIO, JAMES R P.A.
201 E KENNEDY BLVD
SUITE 775
TAMPA, FL 33602 US

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: JAMES R DE FURIO 03/01/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition

 Name:
 ROJEK, TONY
 Name:
 WERREMEYER, KIT

 Address:
 1528 CROOKED STICK DRIVE
 Address:
 1506 CROOKED STICK DRIVE

 City-St-Zip:
 VALRICO, FL 335947815
 City-St-Zip:
 VALRICO, FL 33596

Title: VP/D () Delete Title: VP/D (X) Change () Addition Name: DERBES, MIKE Name: CARDENAS, BILL

 Address:
 4102 BELLERIVE DR
 Address:
 1403 CROOKED STICK DRIVE

 City-St-Zip:
 VALRICO, FL 335947815
 City-St-Zip:
 VALRICO, FL 33596

Title: TD () Delete Title: TD (X) Change () Addition Name: WERREMEYER, KIT Name: PRYOR, JIM

 Address:
 1506 CROOKED STICK DR
 Address:
 1428 CROOKED STICK DR

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:
 VALRICO, FL 33596

Title: SD () Delete Title: SD (X) Change () Addition Name: CARDENAS, BILL Name: ATCHISON, KARA Address: 1403 CROOKED STICK DRIVE Address: 1510 CROOKED STICK DRIVE

Address: 1403 CROOKED STICK DRIVE Address: 1510 CROOKED STICK DRIVE City-St-Zip: VALRICO, FL 335947815 City-St-Zip: VALRICO, FL 33594

Title: D () Delete Title: D (X) Change () Addition

 Name:
 DERBES, KRISTEN
 Name:
 DERBES, MIKE

 Address:
 4102 BELLERIVE PL.
 Address:
 4102 BELLERIVE PL.

 City-St-Zip:
 VALRICO, FL 335947815
 City-St-Zip:
 VALRICO, FL 33596

Title: D () Delete Title: () Change () Addition

 Name:
 MYNSTER, MAYRA
 Name:

 Address:
 1525 CROOKED STICK DRIVE
 Address:

 City-St-Zip:
 VALRICO, FL 335947815
 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: KIT WERREMEYER PRES 03/01/2009

Electronic Signature of Signing Officer or Director

Date