

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002537

FILED
Feb 06, 2008
Secretary of State

Entity Name: YORKSHIRE HOMEOWNERS' ASSOCIATION OF POLK COUNTY, INC.

Current Principal Place of Business:

1606 YORKSHIRE TRAIL
LAKELAND, FL 33809 US

New Principal Place of Business:

8058 DARLINGTON CIRCLE
LAKELAND, FL 33809 US

Current Mailing Address:

5337 N SOCRUM LOOP RD
#142
LAKELAND, FL 33809 US

New Mailing Address:

FEI Number: 59-3433700 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KLEMM, RUSSELL E ESQ
C/O CLAYTON & MCCULLOH
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751 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: PD () Delete
Name: MARES, HECTOR
Address: 1622 YORKSHIRE TRAIL
City-St-Zip: LAKELAND, FL 33809

Title: VD () Delete
Name: LOUIS, TOM JR.
Address: 1512 YORKSHIRE TRAIL
City-St-Zip: LAKELAND, FL 33809

Title: S/T () Delete
Name: PEEKE, CHRISTOPHER
Address: 1606 YORKSHIRE TRAIL
City-St-Zip: LAKELAND, FL 33809

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HEIDGERKEN, JERRY
Address: 1555 YORKSHIRE TRAIL
City-St-Zip: LAKELAND, FL 33809

Title: VD (X) Change () Addition
Name: MICHIE, ALISTAIR
Address: 8043 DARLINGTON CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: S/T (X) Change () Addition
Name: FOWLER, DIANE
Address: 8058 DARLINGTON CIRCLE
City-St-Zip: LAKELAND, FL 33809

Title: MEM () Change (X) Addition
Name: LOUIE, MIKE
Address: 1606 YORKSHIRE TRAIL
City-St-Zip: LAKELAND, FL 33809

Title: MEM () Change (X) Addition
Name: WEAVER, CHUCK
Address: 8075 DARLINGTON CIRCLE
City-St-Zip: LAKELAND, FL 33809

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: DIANE FOWLER

S/T

02/06/2008

Electronic Signature of Signing Officer or Director

Date