

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004630

FILED
Feb 15, 2009
Secretary of State

Entity Name: MOSS CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

490 VERACLIFF COURT
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

521 VERACLIFF CT
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-3403128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRSOKE, JOHN
521 VERACLIFF CT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

BROOKE, JOHN R
521 VERACLIFF CT
OVIEDO, FL 32765 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: JOHN R. BROOKE

02/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLAIR, DENNIS
Address: 400 VERACLIFF CT
City-St-Zip: OVIEDO, FL 32765

Title: VD () Delete
Name: PORTER, NEIL
Address: 460 VERACLIFF CT
City-St-Zip: OVIEDO, FL 32765

Title: SD () Delete
Name: WAMPOLE, JIM
Address: 430 VERACLIFF CT
City-St-Zip: OVEIDO, FL 32765

Title: TD () Delete
Name: BROOKE, JOHN
Address: 521 VERACLIFF CT
City-St-Zip: OVIEDO, FL 32765

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: () Change () Addition
Name:
Address:
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: JOHN R. BROOKE

TD

02/15/2009

Electronic Signature of Signing Officer or Director

Date