

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000994

FILED
May 02, 2009
Secretary of State

Entity Name: ROUND BAY ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3360 S.W. ST. LUCIE SHORES DRIVE
PALM CITY, FL 34990 US

New Principal Place of Business:

3400 S.W. ST. LUCIE SHORES DRIVE
PALM CITY, FL 34990 US

Current Mailing Address:

3360 S.W. ST. LUCIE SHORES DRIVE
PALM CITY, FL 34990 US

New Mailing Address:

3400 S.W. ST. LUCIE SHORES DRIVE
PALM CITY, FL 34990 US

FEI Number: 58-2429018 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BROWNIE, JEREMY J
3400 S.W. ST. LUCIE SHORES DRIVE
PALM CITY, FL 34990 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: HARTER, JAMES J
Address: 3360 SW ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: VP () Delete
Name: KRISEMAN, JAMES
Address: 3300 SW ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: S () Delete
Name: BROWNIE, CHRISTINA
Address: 3400 S.W. ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: TR () Delete
Name: BROWNIE, JEREMY
Address: 3400 S.W. ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILIO, JOESPH
Address: 3380 SW ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: VP (X) Change () Addition
Name: HARTER, JAMES J
Address: 3360 SW ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: S (X) Change () Addition
Name: HARTER, PATRICIA
Address: 3360 S.W. ST. LUCIE SHORES DRIVE
City-St-Zip: PALM CITY, FL 34990

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: JEREMY BROWNIE

TR

05/02/2009

Electronic Signature of Signing Officer or Director

Date