

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001242

FILED
Apr 11, 2009
Secretary of State

Entity Name: ELYSIAN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8140 ELYSIAN WAY
TALLAHASSEE, FL 32311 US

New Principal Place of Business:

8134 ELYSIAN WAY
TALLAHASSEE, FL 32311 US

Current Mailing Address:

8140 ELYSIAN WAY
TALLAHASSEE, FL 32311 US

New Mailing Address:

8134 ELYSIAN WAY
TALLAHASSEE, FL 32311 US

FEI Number: 59-3502942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELIFUS, DAVID
8129 ELYSIAN WAY
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

TURNER, DAVID E
8134 ELYSIAN WAY
TALLAHASSEE, FL 32311 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: DAVID E. TURNER

04/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SMITH, CHARLES
Address: 8175 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: PD () Delete
Name: DELIFUS, DAVID
Address: 8127 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: STD () Delete
Name: TURNER, DAVID
Address: 8134 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: DELIFUS, DAVID
Address: 8127 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: PRES (X) Change () Addition
Name: TURNER, DAVID
Address: 8134 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

Title: STD (X) Change () Addition
Name: PAGE, MIKE
Address: 8143 ELYSIAN WAY
City-St-Zip: TALLAHASSEE, FL 32311

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: DAVID E. TURNER

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

Date