

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 09, 2009  
Secretary of State**

DOCUMENT# N97000001307

Entity Name: COLONY MEADOWS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

5397 COLONY MEADOW LN  
SARASOTA, FL 34233 US

**Current Mailing Address:**

**New Mailing Address:**

P O BOX 21233  
SARASOTA, FL 34276 US

FEI Number: 65-0830481      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:**

LITCHFIELD, SHARON  
5397 COLONY MEADOW LN  
SARASOTA, FL 34233 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DST ( ) Delete  
Name: EDDINS, WILLIAM R  
Address: 5328 COLONY MEADOWS LANE  
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DP ( ) Delete  
Name: LITCHFIELD, SHARON  
Address: 5397 COLONY MEADOWS LANE  
City-St-Zip: SARASOTA, FL 34233

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV ( ) Delete  
Name: SELLARS, CAROLYN  
Address: 5377 COLONY MEADOWS LN  
City-St-Zip: SARASOTA, FL 34233

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: WILLIAM R EDDINS

DST

01/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date