2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002241

FILED Mar 16, 2009 Secretary of State

Entity Name: ELDORADO VILLAGE HOMEOWNERS', INC.

Current P	rincipal Place o	of Business:	New Principal Place of Business:	
	T BAY DRIVE		2505 EAST BAY DRIVE	
# 212 _ARGO, F			# 188 LARGO, FL 33771 US	
	lailing Address		New Mailing Address:	
	_	•	New Mailing Address.	
¥1 87	T BAY DR			
LARGO, FI		EEI Number Applied For ()	EEL Number Not Applicable () Contificate (of Status Desired ()
	: 59-3444187	FEI Number Applied For ()	.,	of Status Desired ()
Name and	l Address of Cเ	ırrent Registered Agent:	Name and Address of New Regist	ered Agent:
	DORISANNE T BAY DR #187 'L 33771 US		GIBSON, DORISANNE 2505 EAST BAY DR #187 #187 LARGO, FL 33771 US	
	named entity su e of Florida.	ubmits this statement for the po	rpose of changing its registered office or regi	stered agent, or both,
SIGNATUR	RE:		03/1	6/2009
	Electronic	Signature of Registered Age	t Da	te
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR
Fitle: Name: Address: City-St-Zip:	P () E FATA, FRANCIS 2505 EAST BAY LARGO, FL 337		Title: () Change () A Name: Address: City-St-Zip:	Addition
Fitle: Name: Address: City-St-Zip:	D () [DAYLEY, BARBA 2505 EAST BAY LARGO, FL 337	DR. #37	Title: () Change () A Name: Address: City-St-Zip:	Addition
Fitle: Name: Address: City-St-Zip:	T () E GIBSON, DORIS, 2505 EAST BAY LARGO, FL 337	DR #187	Title: () Change () A Name: Address: City-St-Zip:	Addition
Fitle: Name: Address: City-St-Zip:	S () E VANHOUTEN, BR 2505 EAST BAY LARGO, FL 337	DR #13	Title: S (X) Change () A Name: MACMILLAN, BEVERLY Address: 2505 EAST BAY DR #150 City-St-Zip: LARGO, FL 33771	Addition
Fitle: Name: Address: City-St-Zip:	D () E CROUCHER, BO 2505 EAST BAY LARGO, FL 337	DR #106	Title: () Change () A Name: Address: City-St-Zip:	Addition
Fitle: Name: Nddress:	V () [DELLE CHIAIE, F 2505 EAST BAY		Title: () Change () A Name: Address:	Addition

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:	DORI		$A \cap A \cap A$	N				Τ		03/16	/2009	
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