

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003206

FILED
Mar 20, 2009
Secretary of State

Entity Name: SUNTREE FOREST HOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

SUNTREE FORST AT SUNTREE
6939 N WICKHAM RD
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

SUNTREE FORST AT SUNTREE
6939 N WICKHAM RD
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-3445963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, FRANCIS M CPA
6939 N WICKHAM RD.
MELBOURNE, FL 32940 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: PD () Delete
Name: HAXBY, DONALD L
Address: 575 BRIMWOOD WAY
City-St-Zip: MELBOURNE, FL 32940

Title: VPD () Delete
Name: WITTIG, ROBERT
Address: 867 VILLA DR
City-St-Zip: MELBOURNE, FL 32940

Title: STD () Delete
Name: THOMPSON, JEFFREY
Address: 959 VILLA DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: WITTIG, ROBERT C
Address: 867 VILLA DR
City-St-Zip: MELBOURNE, FL 32940

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: DONALD L. HAXBY

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date