

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004751

FILED
Apr 23, 2009
Secretary of State

Entity Name: BALMORAL OF NORTH FLORIDA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 NW 43RD ST, SUITE 3
GAINESVILLE, FL 32607 US

New Principal Place of Business:

Current Mailing Address:

500 NW 43RD ST, SUITE 3
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-3567874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNERSTONE PROPERTY SOLUTIONS OF N CENTR
500 NW 43RD ST SUITE 3
GAINESVILLE, FL 32607 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: S () Delete
Name: EISENSCHENK, CYNDY
Address: 1401 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607 US

Title: VP () Delete
Name: HUTCHKISS, WILL
Address: 909 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SD () Delete
Name: SAWYER, MIKE
Address: 5000 NW 27TH CT
City-St-Zip: GAINESVILLE, FL 32606

Title: P () Delete
Name: EVANS, GARY
Address: 1517 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: T () Delete
Name: COLEMAN, RICHARD
Address: 1414 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: EISENSCHENK, CYNDY
Address: 1401 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607 US

Title: P (X) Change () Addition
Name: BURNE, ANDREA
Address: 1226 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SD (X) Change () Addition
Name: SAWYER, MIKE
Address: 1320 SW 115TH ST
City-St-Zip: GAINESVILLE, FL 32607

Title: T (X) Change () Addition
Name: EVANS, GARY
Address: 1517 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: D (X) Change () Addition
Name: RAMSEY, PAT
Address: 1020 SW 115TH STREET
City-St-Zip: GAINESVILLE, FL 32607

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: ANDREA BURNE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date