2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000645

FILED Apr 13, 2009 Secretary of State

Entity Name: WHITEHALL AT KINGS RIDGE HOMEOWNERS ASSOCIATION, INC.

Electronic Signature of Registered Agent

Current Principal Place of Business: New Principal Place of Business: C/O PREMIER COMMUNITY MANAGERS 5151 ADANSON ST SUITE 103 ORLANDO, FL 32804 **New Mailing Address: Current Mailing Address:** C/O PREMIER COMMUNITY MANAGERS 5151 ADANSON ST SUITE 103 ORLANDO, FL 32804 FEI Number: 59-3537444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HOUSE, GARY C/O PRÉMIER COMMUNITY MANAGERS 5151 ADANSON ST SUITE 103 ORLANDO, FL 32804 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:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

(X) Change () Addition () Delete VILLANI, LINDA CANTOR-GOSSELIN, FAYE Name: Name: 2007 BRAXTON ST Address: 2094 BRAXTON ST Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 Title: () Delete Title: (X) Change () Addition LANGER, HENRY LEE Name: LANGER, HENRY LEE Name: Address: 2144 WINSLEY ST Address: 2144 WINSLEY ST City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 Title: () Delete Title: () Change () Addition PULHAM, ROBERT Name: Name: Address: 4270 SNOWDON ST Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SHAW, MADLYN Name: SHAW, MADLYN 2089 BRAXTON ST 2089 BRAXTON ST Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 Title: () Delete Title: () Change (X) Addition BAILEY, JEFFREY H Name: Name: 2051 BRAXTON ST Address: Address: CLERMONT, FL 34711 City-St-Zip: 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: HENRY LEE LANGER PRES 04/13/2009