

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001780

FILED
Feb 24, 2009
Secretary of State

Entity Name: WINTER HAVEN MANUFACTURED HOME COMMUNITY TENANTS ASSOCIATION, INC.

Current Principal Place of Business:

155 JAY DRIVE
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

ATTN: LEE JAY COLLING
529 VERSAILLES DR., STE 103
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3508046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE JAY COLLING & ASSOCIATES, P.A.
529 VERSAILLES DR
STE 103
MAITLAND, FL 32751 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: P () Delete
Name: CHILDRESS, RITA
Address: 35 CHARLES DR
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP () Delete
Name: ASHDOWN, ANTHONY
Address: 93 LAURA LANE
City-St-Zip: WINTER HAVEN, FL 33880

Title: S () Delete
Name: NOUORNY, JOY
Address: 20 CHARLES DR
City-St-Zip: WINTER HAVEN, FL 33888

Title: VD () Delete
Name: WOODS, NANCY
Address: 155 JAY DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: VARTORELLA, MARTY
Address: 101 LAKE CHARLOTTE DR
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: BOYES, ELAINE
Address: 23 CHARLES DR
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: VARTORELLA, MARTY
Address: 101 LAKE CHARLOTTE DRIVE WEST
City-St-Zip: WINTER HAVEN, FL 33880

Title: S (X) Change () Addition
Name: NOVOTNY, JOY
Address: 20 CHARLES DR
City-St-Zip: WINTER HAVEN, FL 33888

Title: TR (X) Change () Addition
Name: WOODS, NANCY
Address: 155 JAY DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: BOYES, ELAINE
Address: 23 CHARLES DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: LESHER, CHUCK
Address: 49 DALE DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

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: NANCY WOODS

TR

02/24/2009

Electronic Signature of Signing Officer or Director

Date