


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90057 015 ****61.25

DOCUMENT # N98000006154 1. Entity Name CURRYVILLE WOODS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 1750 W. BROADWAY ST. 118 OVIEDO, FL 32765			Mailing Address 1750 W. BROADWAY ST. 118 OVIEDO, FL 32765		
2. Principal Place of Business - No P.O. Box # 1812 Terra Verde Ln.		3. Mailing Address 1812 Terra Verde Ln.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Chuluota FL		City & State Chuluota FL		4. FEI Number 59-3556434	
Zip 32766		Country USA		Applied For <input type="checkbox"/> Not Applicable	
Zip 32766		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DAVIS, KEVIN 1750 W. BROADWAY ST #118 OVIEDO, FL 32765				7. Name and Address of New Registered Agent Name Kim Huck Street Address (P.O. Box Number is Not Acceptable) 1812 Terra Verde Ln. City Chuluota FL Zip Code 32766	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Kim Huck</i></u> DATE <u>3/7/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HUCK, KIMBERLY <input type="checkbox"/> Delete 1812 TERRA VERDE LANE CHULUOTA, FL 32768				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CRAWLEY, JERI <input type="checkbox"/> Delete 1860 CADENCE CT CHULUOTA, FL 32768				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAGA, LYSSA <input type="checkbox"/> Delete 2311 PINE MEADOWS PL CHULUOTA, FL 32768				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERS, STEVE <input type="checkbox"/> Delete 1790 TERRA VERDE LANE CHULUOTA, FL 32768				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DALRYMPIE, BROCK <input type="checkbox"/> Delete 1791 TERRA VERDE LN CHULUOTA, FL 32768				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SENECAL, PETE <input type="checkbox"/> Delete 2444 PINE MEADOWS PLACE CHULUOTA, FL 32768				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Kim Huck</i></u> DATE <u>3/7/08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					