

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000152

FILED
Jan 17, 2009
Secretary of State

Entity Name: VINEYARD ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

10805 VINEYARD COURT
CLERMONT, FL 34711 US

New Principal Place of Business:

10805 VINEYARD COURT
CLERMONT, FL 347116449 US

Current Mailing Address:

10805 VINEYARD COURT
CLERMONT, FL 34711 US

New Mailing Address:

10805 VINEYARD COURT
CLERMONT, FL 347116449 US

FEI Number: 65-0888369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOME, JAMES J SR
10805 VINEYARD COURT
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

THOME, JAMES J SR
10805 VINEYARD COURT
CLERMONT, FL 347116449 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:

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: THOME, JAMES J SR.
Address: 10805 VINEYARD COURT
City-St-Zip: CLERMONT, FL 34711

Title: VP/S () Delete
Name: HOFFMAN, KEN
Address: 10802 VINEYARD CT
City-St-Zip: CLERMONT, FL 34711

Title: TREA () Delete
Name: MILLS, LORENZO
Address: 10801 VINEYARD CT
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: THOME, JAMES J SR.
Address: 10805 VINEYARD COURT
City-St-Zip: CLERMONT, FL 347116449

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

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: JAMES J THOME SR

PRES

01/17/2009

Electronic Signature of Signing Officer or Director

Date