

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001117

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: EAGLE LAKE TWO HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

PO BOX 061050  
PALM BAY, FL 32906

## New Principal Place of Business:

491 BENTON DR  
MELBOURNE, FL 32901

## Current Mailing Address:

P.O. BOX 061050  
PALM BAY, FL 32906

## New Mailing Address:

FEI Number: 59-3562110      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KANE, MICHAEL  
491 BENTON DRIVE  
MELBOURNE, FL 32901      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: PD      ( ) Delete  
Name: KANE, MICHAEL  
Address: 491 BENTON DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: VD      ( ) Delete  
Name: CHRISTMAN, MARY  
Address: 631 BENTON DR  
City-St-Zip: MELBOURNE, FL 32901

Title: SD      ( ) Delete  
Name: WOOD, CARLA  
Address: 4127 MT CARMEL LANE  
City-St-Zip: MELBOURNE, FL 32901

Title: D      ( ) Delete  
Name: BOISE, EILEEN  
Address: 3996 MT CARMEL . LN  
City-St-Zip: MELBOURNE, FL 32901

Title: D      (X) Delete  
Name: WHITE, DONALD  
Address: 570 BENTON DRIVE  
City-St-Zip: MELBOURNE, FL 32901

Title: TD      (X) Delete  
Name: WYATT, JACK K  
Address: 3937 MT CARMEL LN  
City-St-Zip: MELBOURNE, FL 32901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD      (X) Change ( ) Addition  
Name: WOOD, CARLA  
Address: 4127 MOUNT CARMEL LANE  
City-St-Zip: MELBOURNE, FL 32901

Title: SD      (X) Change ( ) Addition  
Name: SCHWEITZER, KAY  
Address: 4147 MT CARMEL LANE  
City-St-Zip: MELBOURNE, FL 32901

Title: TD      (X) Change ( ) Addition  
Name: DAVIS, WILLIAM H  
Address: 511 CRESTON CT  
City-St-Zip: MELBOURNE, FL 32901

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: WILLIAM H. DAVIS

TD

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date