

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005184

FILED  
Apr 25, 2008  
Secretary of State

**Entity Name:** CEDAR NORTH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5955 TG LEE BLVD, SUITE 300  
ORLANDO, FL 328224457

**New Principal Place of Business:**

**Current Mailing Address:**

5955 TG LEE BLVD, SUITE 300  
ORLANDO, FL 328224457

**New Mailing Address:**

**FEI Number:** 59-3706979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LELAND MANAGEMENT  
8009 S ORANGE AVENUE  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

LELAND MANAGEMENT  
5955 TG LEE BLVD, SUITE 300  
ORLANDO, FL 328224457 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: \_\_\_\_\_

04/25/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: WILLIAMS, TANYA  
Address: 1073 CHERRY POINT WAY  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete  
Name: DAVIS, NORMA  
Address: 910 PLUMBRIDGE COURT  
City-St-Zip: JACKSONVILLE, FL 32218

Title: PD ( ) Delete  
Name: GOODALL, STUART  
Address: 901 PLUMBRIDGE COURT  
City-St-Zip: JACKSONVILLE, FL 32218

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: PD (X) Change ( ) Addition  
Name: GOODALL, STUART  
Address: 101 PLUMBRIDGE COURT  
City-St-Zip: JACKSONVILLE, FL 32218

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: STUART GOODALL

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date