

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005184

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200

**New Principal Place of Business:**

1639 BEACH BLVD. #15  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200

**New Mailing Address:**

P. O. BOX 50886  
JACKSONVILLE BEACH, FL 32240

**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  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 328093200 US

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

RIVER CITY MANAGEMENT SERVICES  
1639 BEACH BLVD. #15  
JACKSONVILLE BEACH, FL 32250 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:** STHOMPSON

02/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** S  
**Name:** SINCLAIR, HERTHESIA  
**Address:** 1639 BEACH BLVD.  
**City-St-Zip:** JACKSONVILLE BEACH, FL 32250

**Title:** VP/T  
**Name:** LOVELY, VIRGINIA  
**Address:** 1639 BEACH BLVD.  
**City-St-Zip:** JACKSONVILLE BEACH, FL 32250

**Title:** P  
**Name:** GOODALL, STUART  
**Address:** 1639 BEACH BLVD.  
**City-St-Zip:** JACKSONVILLE BEACH, FL 32250

I hereby 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 all other like empowered.

**SIGNATURE:** STHOMPSON

RA

02/17/2011

Electronic Signature of Signing Officer or Director

Date