

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006339

FILED  
Mar 07, 2009  
Secretary of State

**Entity Name:** OTTER BAY HAVEN LANDOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7806 PAUL BUCHAAN HWY  
PLANT CITY, FL 33565 US

**New Principal Place of Business:**

**Current Mailing Address:**

POB 981  
CRYSTAL SPRINGS, FL 33524 US

**New Mailing Address:**

**FEI Number:** 31-1678717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARREN, KAREN L  
7806 HWY 39  
PLANT CITY, FL 33565 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: P ( ) Delete  
Name: WARREN, KAREN  
Address: 7806 HWY 39  
City-St-Zip: PLANT CITY, FL 33565

Title: S ( ) Delete  
Name: REY, HELEN  
Address: 27255 LAMBETH RD  
City-St-Zip: BROOKSVILLE, FL 34602

Title: T ( ) Delete  
Name: WARREN, RICHARD  
Address: 7856 HWY 39  
City-St-Zip: PLANT CITY, FL 33565

Title: BOD ( ) Delete  
Name: CARSON, HAP  
Address: 2901 N FRITZKIE RD  
City-St-Zip: DOVER, FL 33527

Title: VP ( ) Delete  
Name: GAYLORD, DEBBIE  
Address: 15501 MORGAN ST  
City-St-Zip: CLEARWATER, FL 33760

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

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

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

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

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: KAREN WARREN

P

03/07/2009

Electronic Signature of Signing Officer or Director

Date