2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002221

FILED Apr 27, 2007 Secretary of State

Entity Name: FERN MEADOWS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6767 N WICKHAM RD. 6905 N. WICKHAM ROAD SUITE 401 #500 MELBOURNE, FL 32940 MELBOURNE, FL 32940 **Current Mailing Address:** New Mailing Address: 1978 ROCKLEDGE BLVD 1978 ROCKLEDGE BLVD STE 106 SUITE 106 ROCKLEDGE, FL 32955 ROCKLEDGE, FL 32955 FEI Number: 04-3676671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARKNESS, KAREN ESQ BURKES, BARABARA A 6767 N WICKHAM ROAD 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 SUITE 500 MELBOURNE, FL 32940 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: BARBARA A. BURKE 04/27/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BARIN, DAVID BARIN, DAVID Name: Name: 6767 N WICKHAM RD., STE 500 Address: 6905 N WICKHAM ROAD, SUITE 201 Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: VTD Title: (X) Change () Addition () Delete CURLES, TOM Name: CURLES, TOM Name: Address: 6767 N WICKHAM ROAD, SUITE 500 Address: 6905 N. WICKHAM ROAD, SUITE 401 City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: SD () Delete Title: (X) Change () Addition WALKER, LISA O'TOOLE, HAZEL Name: Name: 6767 N. WICKHAM RD., S TE 500 6905 N. WICKHAM ROAD, SUITE 401 Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: VD () Change (X) Addition Name: Name: MITCHELL, KENNETH R 6905 N. WICKHAM ROAD, SUITE 401 Address: Address: City-St-Zip: City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: () Change (X) Addition MOORE, MICHAEL Name: Name: 1732 CRESSA CIRCLE Address: Address: City-St-Zip: City-St-Zip: COCOA, FL 32926

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: HAZEL O'TOOLE TD 04/27/2007