2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Feb 20, 2008 8:00 am
Secretary of State
02-20-2008 90005 036 ****61.25

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1. Entity Name
I-4 INDUSTRIAL PARK 4TH SECTION PROPERTY OWNERS' ASSOCIATION, INC.

400285518

Principal Place of Business	Mailing Address
1801 LEE ROAD SUITE 200 WINTER PARK, FL 32789	P.O. BOX 941618 MAITLAND, FL 32794

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01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-4680849
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HICKMAN, ANDRE F
1801 LEE ROAD, SUITE 200
WINTER PARK, FL 32789

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HICKMAN, ANDRE F
STREET ADDRESS	P.O. BOX 941618
CITY-ST-ZIP	MAITLAND, FL 32794
TITLE	D
NAME	MILLER, HAROLD A
STREET ADDRESS	P.O. BOX 941618
CITY-ST-ZIP	MAITLAND, FL 32794
TITLE	D
NAME	WARD, JOSIANE
STREET ADDRESS	P.O. BOX 941618
CITY-ST-ZIP	MAITLAND, FL 32794
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Andre F. Hickman 2/18/08 407-629-1688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #