

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2007  
Secretary of State**

DOCUMENT# N04000006437

Entity Name: EWING PLACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

25400 U.S. HIGHWAY 19 NORTH  
SUITE 154  
CLEARWATER, FL 33763

**New Principal Place of Business:**

**Current Mailing Address:**

25400 U.S. HIGHWAY 19 NORTH  
SUITE 116  
CLEARWATER, FL 33763

**New Mailing Address:**

25400 U.S. HIGHWAY 19 NORTH  
SUITE 154  
CLEARWATER, FL 33763

FEI Number: 20-3434622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CANTU, DAVID O  
25400 U.S. HIGHWAY 19 NORTH  
SUITE 116  
CLEARWATER, FL 33763 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: PD ( ) Delete  
Name: PAGE, J. DAVID  
Address: 25400 U.S. HIGHWAY 19 NORTH, SUITE 154  
City-St-Zip: CLEARWATER, FL 33763

Title: VSTD ( ) Delete  
Name: LEACH, PETER H  
Address: 25400 U.S. HIGHWAY 19 NORTH, SUITE 154  
City-St-Zip: CLEARWATER, FL 33763

Title: D ( ) Delete  
Name: WITTER, WILLIAM P  
Address: 809 DRUID ROAD  
City-St-Zip: CLEARWATER, FL 33756

**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:

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: DANIEL FULTON

PM

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date