

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2008  
Secretary of State**

DOCUMENT# N06000004244

Entity Name: FLORIDA HOME OWNERSHIP RESOURCE CENTER, INC.

**Current Principal Place of Business:**

14131 PORTRUSH DR.  
ORLANDO, FL 32828

**New Principal Place of Business:**

**Current Mailing Address:**

14131 PORTRUSH DR.  
ORLANDO, FL 32828

**New Mailing Address:**

FEI Number: 20-4922907      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARON, AIDA  
14131 PORTRUSH DR.  
ORLANDO, FL 32828      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: CARON, AIDA  
Address: 14131 PORTRUSH DR.  
City-St-Zip: ORLANDO, FL 32828

Title: TG      ( ) Delete  
Name: CARON, DONALD  
Address: 14131 PORTRUSH DR.  
City-St-Zip: ORLANDO, FL 32828

Title: VD      ( ) Delete  
Name: ALVARADO, MARIA  
Address: 14131 PORTRUSH DR.  
City-St-Zip: ORLANDO, FL 32828

**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: AIDA CARON

PD

04/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date