## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000003713

FILED Apr 17, 2008 Secretary of State

Entity Name: ARBORVIEW PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business	ss:
----------------------------------------------------------------------	-----

4700 MILLENIA BLVD 1600 WEST COLONIAL DRIVE STE 400 ORLANDO, FL 32804

ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

4700 MILLENIA BLVD 1600 WEST COLONIAL DRIVE

STE 400 ORLANDO, FL 32804 ORLANDO, FL 32839

FEI Number: 26-0437904 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:

MCCARTHY, THOMAS
4700 MILLENIA BLVD
5TE 400
ORLANDO, FL 32839 US
HANSON, JACK
1600 WEST COLONIAL DRIVE
ORLANDO, FL 32804 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: JACK HANSON 04/17/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCCARTHY, THOMAS
 Name:

 Address:
 4700 MILLENIA BLVD - STE 400
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

Name: PETERSON, DON Name: HARTSGROVE, TONY

 Address:
 4700 MILLENIA BLVD - STE 400
 Address:
 4700 MILLENIA BLVD - STE 400

 City-St-Zip:
 ORLANDO, FL 32839
 City-St-Zip:
 ORLANDO, FL 32839

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DOWLING, LARRY
 Name:

 Address:
 4700 MILLENIA BLVD - STE 400
 Address:

 City-St-Zip:
 ORLANDO, FL 32839
 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: THOMAS MCCARTHY PD 04/17/2008