

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40286

FILED
Apr 16, 2007
Secretary of State

Entity Name: EAST ORLANDO SANCTUARY HOMEOWNERS ASSOCIATION,INC.

Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3185224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W. SR 434, STE. 5000
LONGWOOD, FL 327795044 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: KORTE, SCOTT
Address: 4115 KING EDWARD DR
City-St-Zip: ORLANDO, FL 32826

Title: D () Delete
Name: PICA, DIANA
Address: 4251 KING EDWARD DR
City-St-Zip: ORLANDO, FL 32826

Title: D () Delete
Name: GREEN, RON
Address: 13743 MEADOWPARK AVE
City-St-Zip: ORLANDO, FL 32826

Title: VPD (X) Delete
Name: BEVAN, NATE
Address: 4012 KING EDWARD DR
City-St-Zip: ORLANDO, FL 32826

Title: TD (X) Delete
Name: HAKEEM, BERTY
Address: 4132 KING EDWARD DR
City-St-Zip: ORLANDO, FL 32826

Title: D (X) Delete
Name: STEINHAUS, PETER
Address: 13816 VALLEYBROOKE LN
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FERRARI, JIM
Address: 4325 WILLOWCREST CT
City-St-Zip: ORLANDO, FL 32826

Title: VPD (X) Change () Addition
Name: OULABI, LORI
Address: 4236 FOREST ISLAND DR
City-St-Zip: ORLANDO, FL 32826

Title: SD (X) Change () Addition
Name: MCGILL, DONNA
Address: 4224 BOCA WOODS DR
City-St-Zip: ORLANDO, FL 32826

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 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: JIM FERRARI

PD

04/16/2007

Electronic Signature of Signing Officer or Director

Date