2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001756

Entity Name: DUNBRIDGE HOMEOWNERS ASSOCIATION, INC.

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O HARA MGMT 931 S. SEMORAN BLVD 931 S SEMORAN BLVD, SUITE 214 SUITE # 214

WINTER PARK, FL 32789 WINTER PARK, FL 32789 US

Current Mailing Address: New Mailing Address:

C/O HARA MGMT 931 S. SEMORAN BLVD

SUITE #214 931 S SEMORAN BLVD, SUITE 214

WINTER PARK, FL 32789 WINTER PARK, FL 32789 US

FEI Number: 59-3179961 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:

HARA MGMT, INC HARA MANAGEMENT, INC. 931 S SEMORAN BLVD 931 S SEMORAN BLVD SUITE 214 SUITE 214

WINTER PARK, FL 32789 US WINTER PARK, FL 32789 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: ROBERT HARA 04/10/2009 Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ALLEN, MATT SOLOMON, JOELLEN Name: Name: 1241 DUNBRIDGE ST Address: 1267 DUNBRIDGE ST Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703

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

OSTEEN, KELLY Name: COGGIN, DAWN Name: Address: 1952 BURBERRY STREET Address: 1960 BURBERRY ST City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703

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

SOLOMON, JOELLEN ALLEN, MATT Name: Name: 1267 DUNBRIDGE ST 1241 DUNBRIDGE ST Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703

Title: TD () Delete Title: SD (X) Change () Addition

Name: COGGIN, DAWN Name: HIGGINBOTHAM, CATHY 1960 BURBERRY ST 1282 DUNBRIDGE ST Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703

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

WILKERSON, NATHAN LENIHAN, WILLIAM Name: Name: 1168 DUNBRIDGE ST 1129 MAYBROOK ST Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32703

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

LENIHAN, WILLIAM Name: Name: Address: 1129 MAYBROOK STREET Address: APOPKA, FL 32703 City-St-Zip: 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: MATT ALLEN **PRES** 04/10/2009

Electronic Signature of Signing Officer or Director

Date