

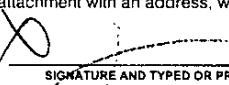


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 20, 2008 8:00 am**  
**Secretary of State**

03-20-2008 90025 024 \*\*\*\*61.25

DOCUMENT # N95000004348					
1. Entity Name EMERALD FOREST ORANGE COUNTY HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 5401 S.. KIRKMAN RD. STE. 450 ORLANDO, FL 32819 US		Mailing Address 5401 S.. KIRKMAN RD. STE. 450 ORLANDO, FL 32819 US		<p style="text-align: right; font-size: 24pt;"><b>50000102</b></p> 	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01082008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-3341611	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
COMMUNITY MANAGEMENT PROFESSIONAL, INC 5401 S KIRKMAN RD SUITE 450 ORLANDO, FL 32819				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<p><b>Filing Fee is \$61.25</b>  <b>Due by May 1, 2008</b></p>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<p><b>\$5.00</b> May Be Added to Fees</p> <p><b>Make check payable to Florida Department of State</b></p>	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ROGERS, KEVIN	NAME			
STREET ADDRESS	10113 CANOPY TREE CT	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
TITLE	DT <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PASQUINELLI, MIA	NAME			
STREET ADDRESS	8614 TARA OAKS COURT	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
TITLE	DS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MORGAN, CAROLYN	NAME			
STREET ADDRESS	8606 TERRANCE PINES CT	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LOSCH, RANDY	NAME			
STREET ADDRESS	10250 EMERALD FOREST AVENUE	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
TITLE	DVP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KIMMERLE, BARBARA	NAME			
STREET ADDRESS	10434 AUTUMN GLEN COURT	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DERIDDER, SHARON	NAME			
STREET ADDRESS	8418 WILLOW TREE COURT	STREET ADDRESS			
CITY-ST-ZIP	ORLANDO, FL 32836	CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Date: <u>2/21/08</u>		Daytime Phone #: <u>407-497-3261</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	