2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2012
Secretary of State

DOCUMENT# N98000001162

Entity Name: PHILLIPPE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY. 19, SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

C/O QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY. 19, SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 36-4409808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY. 19
SUITE 7Q
NEW PORT RICHEY, FL 34652 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
Name: RUKAMP, JEAN
Address: 5901 US HWY. 19, SUITE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD
Name: MOORE, MICHAEL
Address: 5901 US HWY. 19, SUITE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD
Name: LEWALSKI, MARK
Address: 5901 US HWY. 19, SUITE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VPD
Name: HICKMAN, TODD
Address: 5901 US HWY. 19, SUITE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby 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 all other like empowered.

SIGNATURE: JEAN RUKAMP PRES 01/20/2012

Electronic Signature of Signing Officer or Director — Date