2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004016

FILED Apr 08, 2008 Secretary of State

Entity Name: TUCK'S KNOLL HOMEOWNERS ASSOCIATION, INC.

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

3863 TUCK'S POINT 3867 TUCK'S POINT WINTER PARK, FL 32792 WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

3863 TUCK'S POINT
WINTER PARK, FL 32792
3867 TUCK'S POINT
WINTER PARK, FL 32792
WINTER PARK, FL 32792

FEI Number: 59-3622011 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:

BYRON, WILLIAM I DAVID, WRIGHT W
3863 TUCK'S POINT
WINTER PARK, FL 32792 US WINTER PARK, FL 32792 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: DAVID WRIGHT 04/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: BYRON, WILLIAM I Name: DAVID, WRIGHT W

Address: 3863 TUCK'S POINT Address: 3867 TUCK'S POINT City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

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

 Name:
 TREVISANI, PAULA
 Name:
 HOFFMAN, CHARLES

Address: 3874 TUCK'S POINT Address: 3851 TUCK'S POINT City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 WRIGHT, DAVID
 Name:
 THOMAS, JOHN

 Address:
 3867 TUCK'S POINT
 Address:
 3870 TUCK'S POINT

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 WINTER PARK, FL 32792

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: DAVID WRIGHT D 04/08/2008