2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006597

FILED Apr 22, 2005 Secretary of State

Entity Name: ANDOVER POINT HOMEOWNERS' ASSOCIATION, INC.

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

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779

FEI Number: 01-0581258 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:

PHILLIPS, ROGER
ATTWOOD-PHILLIPS INC.
1350 ORANGE AVE, STE. 100
WINTER PARK, FL 32789 US
HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 434
LONGWOOD, FL 32779 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: JAMES W HART JR 04/22/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: DIA, ADIA L Name: PHILLIPS, KRISTIN

Address: 10137 ANDEROVER POINT CIRCLE Address: 1014 ANDEROVER POINT CIRCLE City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825

Title: VD () Delete Title: SD (X) Change () Addir

Title: VD () Delete Title: SD (X) Change () Addition Name: MOBLEY, DUAL Name: SMITH, KAY

Address: 10113 ANDOVER POINT CIR. Address: 10349 ANDOVER POINT CIR. City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825

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

Name: PALMER, JOHN B Name: SMITH, KAY

Address: 7053 UNIVERSITY BLVD. Address: 10349 ANDOVER POINT CIR City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KRISTIN PHILLIPS PD 04/22/2005