

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 04, 2007
Secretary of State

DOCUMENT# N08675

Entity Name: COUNTRY HILLS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**P.O. BOX 4172
PLANT CITY, FL 335634172**New Principal Place of Business:**4664 COPPER LANE
PLANT CITY, FL 33566**Current Mailing Address:**P.O. BOX 4172
PLANT CITY, FL 335634172**New Mailing Address:****FEI Number:** 59-2520273 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ANDERSON, CHRISTINE
4608 COPPER LANE
PLANT CITY, FL 33566 US**Name and Address of New Registered Agent:**LAMBOI, CYNTHIA D
4664 COPPER LANE
PLANT CITY, FL 33566 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: CYNTHIA D LAMBOI

05/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: ANDERSON, CHRISTINE
Address: 4608 COPPER LN
City-St-Zip: PLANT CITY, FL 33566**Title:** VP () Delete
Name: LAMBOI, CYNTHIA D
Address: 4664 COPPER LN
City-St-Zip: PLANT CITY, FL 33566**Title:** T () Delete
Name: HAYS, STEPHEN LEE
Address: 4714 WEST WIND DR
City-St-Zip: PLANT CITY, FL 33566**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: LAMBOI, CYNTHIA D
Address: 4664 COPPER LN
City-St-Zip: PLANT CITY, FL 33566**Title:** VP (X) Change () Addition
Name: COLE, JESSIE
Address: 4603 CRIMSON COURT
City-St-Zip: PLANT CITY, FL 33566**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SECR () Change (X) Addition
Name: VELEZ, CATHERINE
Address: 4614 CRIMSON COURT
City-St-Zip: PLANT CITY, FL 33566

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: CYNTHIA D LAMBOI

PRES

05/04/2007

Electronic Signature of Signing Officer or Director

Date