2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# N29145

Entity Name: COUNTRY ADDRESS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

107 N LINE DR
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

107 N LINE DR
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-2871531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA D
107 N LINE DR
APOPKA, FL 32703 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 ( ) Delete
Name: SULLIVAN, KENNETH
Address: 1554 MARGARETE CRESCENT DR
City-St-Zip: APOPKA, FL 32703 US

Title: VD ( ) Delete
Name: GRONAUER, IVETTE
Address: 1564 MARGARETE CRESCENT DR
City-St-Zip: APOPKA, FL 32703 US

Title: SD ( ) Delete
Name: WITT, CASSANDRA
Address: 1459 MARGARETE CRESCENT DR
City-St-Zip: APOPKA, FL 32703 US

Title: TD (X) Delete
Name: COHEN, ROBERTA
Address: 1972 MARTINA ST
City-St-Zip: APOPKA, FL 32703 US

Title: D (X) Delete
Name: FRANCO, ROBERT
Address: 2063 INGE COURT
City-St-Zip: APOPKA, FL 32703 US

Title: D (X) Delete
Name: RANCK, PATRICIA
Address: 2055 SUE ELLEN CT
City-St-Zip: APOPKA, FL 32703 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SULLIVAN, KENNETH C
Address: 1554 MARGARETE CRESCENT DR
City-St-Zip: APOPKA, FL 32703 US

Title: VSD (X) Change ( ) Addition
Name: WITT, CASSANDRA
Address: 1459 MARGARETE CRESCENT DR
City-St-Zip: APOPKA, FL 32703 US

Title: TD (X) Change ( ) Addition
Name: COHEN, ROBERTS
Address: 1972 MARTINA STREET
City-St-Zip: APOPKA, FL 32703 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KENNETH C SULLIVAN PD 04/14/2008

Electronic Signature of Signing Officer or Director — Date