2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001567

FILED Apr 15, 2008 Secretary of State

Entity Name: METROWEST UNIT FIVE HOMEOWNERS' ASSOCIATION, INC.

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

2180 WEST ST 434, SUITE 5000 2180 WEST ST 434 LONGWOOD, FL 327795044 US

SUITE 5000

LONGWOOD, FL 327795044 US

Current Mailing Address: New Mailing Address:

2180 WEST ST 434, SUITE 5000 2180 WEST ST 434

LONGWOOD, FL 327795044 US SUITE 5000

LONGWOOD, FL 327795044 US

FEI Number: 59-3247584 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:

HART, JAMES W JR 2180 W SR 434 STE 5000 LONGWOOD, FL 327795044 US HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 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 04/15/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition FRANCOIS, MADELEINE BELL, RUDY Name: Name:

7805 ST GILES PL Address: 7730 BARDMOOR HILL CIR Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

Title: Title: (X) Change () Addition () Delete KLEIN, GLENN Name: SCHIFFHAUER, MICHAEL Name:

Address: 1939 WESTPOINTE CIR Address: 7778 BARDMOOR HILL CIR City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

Title: () Delete Title: () Change () Addition

RICHARDS, ARTHUR Name: Name: 7842 ST ANDREWS CIR Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

(X) Change () Addition Title: () Delete Title: SD Name: LOSTLEN, GERRI MS Name: CALVANELLI, JUDY

7754 BARDMOOR HILL CIR Address: 1925 KNOTTING HILL DR Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

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

GILES, LARRY Name: Name:

7818 BARDMOOR HILL CIR Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32835

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: RUDY BELL PD 04/15/2008