2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707587

FILED Jan 21, 2008 Secretary of State

Entity Name: ARDSLEY MANOR - RADCLYFFE TERRACE ASSOCIATION, INC.

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

1421 QUAILEY STREET
ORLANDO, FL 32804 US

1434 QUAILEY STREET
ORLANDO, FL 32804 US

Current Mailing Address: New Mailing Address:

1421 QUAILEY STREET
ORLANDO, FL 32804 US

1434 QUAILEY STREET
ORLANDO, FL 32804 US

FEI Number: 70-7587581 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:

NICOL, ANDREW

1421 QUAILEY STREET
ORLANDO, FL 32804 US

CHANDLER, CINDY
1434 QUAILEY STREET
ORLANDO, FL 32804 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: CINDY CHANDLER 01/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: NICOL, ANDREW W Name: CHANDLER, CINDY

Name:NICOL, ANDREW WName:CHANDLER, CINDYAddress:1421 QUAILEY STREETAddress:1434 QUAILEY STREETCity-St-Zip:ORLANDO, FL 32804 USCity-St-Zip:ORLANDO, FL 32804 US

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

 Name:
 CHANDLER, CINDY
 Name:

 Address:
 1434 QUAILEY STREET
 Address:

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:

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

 Name:
 CALL, JENNIFER
 Name:

 Address:
 1437 KNOWLLWOOD
 Address:

 City-St-Zip:
 ORLANDO, FL 32804
 City-St-Zip:

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

 Name:
 MOCERINO, ANTHONY
 Name:

 Address:
 2601 ARDSLEY DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32804
 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: CINDY CHANDLER P 01/21/2008