2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715680

FILED May 01, 2008 Secretary of State

Entity Name: NORTHWEST ORANGE COUNTY IMPROVEMENT ASSOCIATION, INC.

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

4253 PONCAN ROAD 4253 PONCAN ROAD P.O. BOX 786 ZELLWOOD, FL 327987786

ZELLWOOD, FL 327987786

New Mailing Address: Current Mailing Address:

4253 PONCAN ROAD P.O. BOX 786

P.O. BOX 786 ZELLWOOD, FL 327987786 ZELLWOOD, FL 327987786

FEI Number: 59-2022527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BIRKO, DAVID A HALLORAN, BEVERLY F 2829 JÚNCTION RD 6520 SWAIN ROAD

ZELLWOOD, FL 32798 US SORRENTO, FL 32776 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: BEVERLY F, HALLORAN 05/01/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SCOFIELD, A T III BARRETT, MARVIN Name: Name: 3125 ONDICH RD Address: 5051 PALM DR Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: ZELLWOOD, FL 32798

Title: () Delete Title: () Change () Addition MILLER, ELLEN Name: Name:

Address: 222 N KELLY PARK RD Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip:

Title: () Delete Title: (X) Change () Addition SIMANSKI, JEFF

Name: HALLORAN, BEVERLY Name: 4926 SADLER RD 6520 SWAIN ROAD Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: SORRENTO, FL 32776

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

Name: HALLORAN, BEVERLY Name: SMITH, TERI 6520 SWAIN RD 1258 ADIRONDACK Address: Address: APOPKA, FL 32712 City-St-Zip: SORRENTO, FL 32776 City-St-Zip:

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

BIRKO, DAVID BIRKO, DAVID Name: Name: 2829 JUNCTION RD 2829 JUNCTION RD Address: Address: City-St-Zip: ZELLWOOD, FL 32798 City-St-Zip: ZELLWOOD, FL 32798

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

ODOM FAYE Name: Name: Address: P O BOX 279 Address: PLYMOUTH, FL 32768 City-St-Zip: 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: BEVERLY F. HALLORAN **PRES** 05/01/2008

Electronic Signature of Signing Officer or Director

Date