2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726811

FILED Feb 15, 2005 Secretary of State

Entity Name: ACADEMY HILL HOMEOWNERS ASSOCIATION, INC.

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

7800 NW 70TH CT. TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

P.O. BOX 25551

TAMARAC, FL 33320 US

FEI Number: 59-1410776 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:

AXELROD, RICHARD 8121 PINE CIRCLE TAMARAC, FL 33321

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

AXELROD, RICHARD Name: Name: 8121 PINE CIRCLE Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip:

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

GRIFFITHS, SUSAN GRIFFITHS, SUSAN Name: Name: Address: 7106 NW 78TH AVENUE Address: 7106 NW 78TH AVENUE City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321

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

GRABOWSKI, SHARON GRABOWSKI, SHARON Name: Name: 15431 SW 31 ST 2431 NASSAU LANE Address: Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: FT. LAUD. FL 33312

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

GRABOWSKI, JOSEPH J Name: GRABOWSKI, JOSEPH J Name: 2431 NASSAU LANE Address: 15431 SW 31 ST Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: FT LAUD, FL 33312

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

JAMES, CHRIS POLLOCK FEDDISH, JANET Name: Name: 7820 NW 70TH CT 7109 NW 78 AVENUE Address: Address: FORT LAUDERDALE, FL 33321 City-St-Zip: City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD AXELROD Ρ 02/15/2005