

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727052

FILED
Apr 30, 2006
Secretary of State

Entity Name: EAST BAY HOMEOWNERS, INC.

Current Principal Place of Business:

P O BOX 690153
ORLANDO, FL 328697153

New Principal Place of Business:

Current Mailing Address:

P O BOX 690153
ORLANDO, FL 328697153 US

New Mailing Address:

FEI Number: 59-1912630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, GAIL
8435 CARAWAY CT
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LYNN, DAMON H
6122 MARLBERRY DRIVE
ORLANDO, FL 32819 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: DAMON H. LYNN

04/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARBARA, FRY
Address: 6195 VALENIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: DD () Delete
Name: BELL, GAIL
Address: 8435 CARAWAY CT
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: WITTHOLM, TOMMY
Address: 8481 CARAWAY CT
City-St-Zip: ORLANDO, FL 32819

Title: VP () Delete
Name: THOMAS, PATTY
Address: 6197 VALERIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: AST () Delete
Name: GILL, GREG
Address: 8496 TANSY
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: FRY, BARBARA
Address: 6195 VALENIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: PRES (X) Change () Addition
Name: LYNN, DAMON H
Address: 6122 MARLBERRY DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: VP (X) Change () Addition
Name: FERRI, ENRICO
Address: 8557 CLEMATIS LANE
City-St-Zip: ORLANDO, FL 32819

Title: TREA (X) Change () Addition
Name: THOMAS, PATTY
Address: 6197 VALERIAN BLVD
City-St-Zip: ORLANDO, FL 32819

Title: BM (X) Change () Addition
Name: WEBB, SANDY
Address: 8740 BANYAN
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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: DAMON H. LYNN

PRES

04/30/2006

Electronic Signature of Signing Officer or Director

Date