2006 NOT-FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Jan 25, 2006 08:00 AM **DOCUMENT # 732427 Secretary of State** 1. Entity Name ARENDELL HILL HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 2832 ARENDELL WAY TALLAHASSEE FL 32308 2832 ARENDELL WAY TALLAHASSEE FL 32308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicat Country Zæ Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERTS, LAWRENCE 2832 ARENDELL WAY Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32308 City Zip Code FI 8. 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or privide nerve of regisfored agent and title if applicable FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. סח 70112 ☐ Delete MILE Change CANTEY, MARY NAME MANAF 2356 ARENDELL WAY STREET ADDRESS STREET AUDRESS CHTY-ST-ZIP TALLAHASSEE FL 32308 CITY-S1-218 Delete TITLE ☐ Change Addition TITLE ROBERTS, LAWRENCE NAME NAME U00000401788 STREET ADDRESS 2832 ARENDALL WAY STREET ADDRESS 02/02/06-80058-022 61.25 TALLAHASSEE FL 32308 CSTY-ST-ZIP CITY-ST-ZXP VD Delote ☐ Change ☐ Addition TITLE IIILE ROSINSKY, HERBERT NAME NAME STREET ACCORESS 2308 ARENDELL WAY STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32308 CITY - ST-ZIP Delete BIRT □ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THTLE ☐ Detete T)TLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete DILE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filting does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 explore this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an anathright with an address, with all other tike appropriets.