

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733394

FILED
Mar 24, 2008
Secretary of State

Entity Name: ORANGE BLOSSOM HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9230 S.E. 154TH STREET
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

9230 S.E. 154TH STREET
SUMMERFIELD, FL 34491 US

New Mailing Address:

FEI Number: 59-6579131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PADDOCK, EVELYN
9540 SE 160TH PLACE
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

RUTH, MEDEIROS K T
15394 SE 90TH TERRACE
SUMMERFIELD, FL 34491 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: RUTH K. MEDEIROS

03/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: MEDEIROS, RUTH
Address: 15394 SE 90TH TERR
City-St-Zip: SUMMERFIELD, FL 34491

Title: P () Delete
Name: MARTIN, ROY
Address: 16161 SE 96TH AVE RD
City-St-Zip: SUMMERFIELD, FL 34491

Title: S () Delete
Name: BUTCHART, MAUREEN
Address: 9560 SE 161ST PLACE
City-St-Zip: SUMMERFIELD, FL 34491

Title: VP () Delete
Name: COE, DONALD
Address: 9685 SE 162ND PL
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: MAATJE, FRANCES
Address: 16900 SE 100 CT
City-St-Zip: SUMMERFIELD, FL 34491

Title: D () Delete
Name: BUSHNELL, BUD
Address: 16780 SE 101 CT. RD.
City-St-Zip: SUMMERFIELD, FL 34491

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RUTH K. MEDEIROS

T

03/24/2008

Electronic Signature of Signing Officer or Director

Date