2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745620

Apr 29, 2007 Secretary of State

Entity Name: VILLAGES OF HOMESTEAD AUDUBON VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1851 S CANAL DRIVE HOMESTEAD, FL 33035 **Current Mailing Address: New Mailing Address:** P.O. BOX 901773 HOMESTEAD, FL 33090 FEI Number: 59-1989975 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: SCHMECHTANBERG, LEE C 1533 SUNSET DRIVE STE 201 CORAL GABLES, FL 33143 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 (X) Change () Addition SUTTON, JAMES SUTTON, JAMES Name: Name: 1302 N FIEDLARK LANE Address: 1302 N FIEDLARK LANE Address: City-St-Zip: HOMESTEAD, FL 33035 City-St-Zip: HOMESTEAD, FL 33035 Title: Title: (X) Change () Addition () Delete STINGONE, CINDY Name: STINGONE, CINDY Name: Address: 1301 EGRET RD Address: 1301 EGRET RD City-St-Zip: HOMESTEAD, FL 33035 City-St-Zip: HOMESTEAD, FL 33035 Title: () Delete Title: () Change () Addition CLAPPERTON, WAYNE Name: Name: 1020 N AUDUBON DR Address: Address: City-St-Zip: HOMESTEAD, FL 33035 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: WALDMAN, JUDY Name: Address: 1283 EGRET ROAD Address: City-St-Zip: HOMESTEAD, FL 33035 City-St-Zip: Title: DΡ () Delete Title: () Change () Addition DIEHL, LARRY Name: Name: 1670 EGRET ROAD Address: Address: City-St-Zip: HOMESTEAD, FL 33035 City-St-Zip: Title: () Delete Title: (X) Change () Addition MITCHELL, DEE PETERSON, ROBERT Name: Name: Address: 1027 N AUDUBON DRIVE Address: 1429 KITTIWAKE COURT HOMESTEAD, FL 33035 HOMESTEAD, FL 33035 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: LARRY DIEHL D 04/29/2007