2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745936

FILED Apr 17, 2008 Secretary of State

Entity Name: L'HERMITAGE OWNERS ASSOCIATION, INC.

| | Principal Place of Bus | iness: | New Principal Place | New Principal Place of Business: | |
|---|--|--------------------------|---|---|--|
| 2000 SOL MIAMI, FL | JTH BAYSHORE DRIVI . 33133 | Ξ | | | |
| Current N | Mailing Address: | | New Mailing Addres | ss: | |
| 2000 SOL MIAMI, FL | JTH BAYSHORE DRIVI . 33133 | Ξ | | | |
| FEI Number | r: 59-2089772 FEI Nu | ımber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and | d Address of Current | Registered Agent: | Name and Address | of New Registered Agent: | |
| | MARTIN MR. JTH BAYSHORE DRIVI . 33133 US | ∃ VILLA#11 | | | |
| | e named entity submits te of Florida. | this statement for the p | ourpose of changing its registere | ed office or registered agent, or both, | |
| SIGNATU | | | | | |
| | Electronic Signa | ature of Registered Age | ent | Date | |
| OFFICER | S AND DIRECTORS: | | ADDITIONS/CHANG | ES TO OFFICERS AND DIRECTORS | |
| Title: Name: Address: City-St-Zip: | PRES () Delete MILLER, MARTIN MR. 2000 SOUTH BAYSHORI MIAMI, FL 33133 | E DRIVE, VILLA #11 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VP () Delete WHITE, JOANNE MRS. 2000 SOUTH BAYSHORI MIAMI, FL 33133 | E DRIVE, VILLA #07 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | S () Delete GRETCHEN, TUNKEY M 2000 SOUTH BAYSHORI MIAMI, FL 33133 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| | TRES () Delete HUERTA, ISIDRO MR. | E DR. VILLA#32 | Title: Name: Address: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | 2000 SOUTH BAYSHORI MIAMI, FL 33133 | | City-St-Zip: | | |
| Name: Address: | | RS. | City-St-Zip: Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: MARTY MILLER PRES 04/17/2008