2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755091

FILED Mar 15, 2008 Secretary of State

Entity Name: MARKHAM PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

141 HUNTERS TRAIL 220 HUNTERS TRAIL

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

141 HUNTERS TRAIL 220 HUNTERS TRAIL

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

FEI Number: 59-3511735 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:

GRAHAM, SANDRA BRUNSKILL, GLENN 141 HUNTERS TRAIL 220 HUNTERS TRAIL

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 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: GLENN W. BRUNSKILL 03/15/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: () Change () Addition

 Name:
 FLANDERMEYER, MERLE
 Name:

 Address:
 230 HUNTERS TR.
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

 $\label{eq:total_title} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

 Name:
 BRUNSKILL, GLEN
 Name:
 SMITH, NELLIE

 Address:
 220 HUNTERS TR.
 Address:
 161 HUNTERS TR.

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

Title: S () Delete Title: () Change () Addition

 Name:
 SCHMITT, NANCY
 Name:

 Address:
 151 ARCHERS POINT
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

 Name:
 GRAHAM, SANDRA
 Name:
 BRUNSKILL, GLENN

 Address:
 141 HUNTERS TR.
 Address:
 220 HUNTERS TR.

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

Title: BMAL () Delete Title: () Change () Addition

 Name:
 MARTIN, JON (
 Name:

 Address:
 110 HUNTERS TR.
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 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: GLENN W BRUNSKILL T 03/15/2008