2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757409

FILED Jun 19, 2008 Secretary of State

Entity Name: COLUMBUS HARBOUR HOMEOWNERS' ASSOCIATION, INC.

	rincipal Place of Business:	New Principal Place of Business:	
	FICE BOX 520268 OD, FL 327520268	850 CONCOURSE PKWY SO. MAITLAND, FL 327516145	
Current Mailing Address:		New Mailing Address:	
	FICE BOX 520268 OD, FL 327520268		
n accordan	: 59-2362974 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Age	did not receive the prior notice.)
850 CONC	CARLS, P.A. COURSE PKWY SO. D, FL 327516145 US		
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or	both,
SIGNATUI			
	Electronic Signature of Registere	d Agent Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRE	СТО
Title: Name: Address: City-St-Zip:	P () Delete OLVEY, R. VAN 1320 S GRANT ST LONGWOOD, FL 32750	Title: P (X) Change () Addition Name: ROSENQUIST, DENNIS Address: 501 GRANADA WAY City-St-Zip: LONGWOOD, FL 32750	
	VP () Delete	TH () OL () A LEC	
Title: Name: Address: City-St-Zip:	VP () Delete IRELAND, JAMES A 140 COLUMBUS CIRCLE LONGWOOD, FL 32750	Title: () Change () Addition Name: Address: City-St-Zip:	
Name: Address: City-St-Zip: Fitle: Name: Address:	IRELAND, JAMÉS A 140 COLUMBUS CIRCLE	Name: Address:	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	IRELAND, JAMES A 140 COLUMBUS CIRCLE LONGWOOD, FL 32750 S () Delete CHEW, CLAUDE 430 COLUMBUS CIR	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	IRELAND, JAMES A 140 COLUMBUS CIRCLE LONGWOOD, FL 32750 S () Delete CHEW, CLAUDE 430 COLUMBUS CIR LONGWOOD, FL 32750 T () Delete NAGOWSKI, ERIC 721 HENDEZ WAY	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: T (X) Change () Addition Name: OLVEY, R. VAN Address: 1320 S. GRANT ST	

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: R. VAN OLVEY T 06/19/2008