2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 13, 2007 8:00 am DOCUMENT # 761422 **Secretary of State** 1. Entity Name 03-13-2007 90018 025 ****61.25 ASSOCIATION OF DEVONWOOD HOMEOWNERS, INC. Principal Place of Business Mailing Address 12401 S, DIXIE HIGHWAY MIAMI FL 33156 12401 S, DIXIE HIGHWAY **MIAMI FL 33156** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-2190412 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DOOLEY, BOBBE W 12401 S DIXIE HWY Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Deleic DHE ☐ Addition NAME JOANNOU, GLORIA NAME STREET ADDRESS 6401 SW 134 DR. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 CHY-ST-ZIP SD ... Delete THE ☐ Change Addition NAME DOOLEY, BOBBE NAME STREET ADDRESS 6540 W 134 DR STREET ADDRESS CHY-ST-ZIP MIAMI FL 33156 CHY-S1-7IP THILE ☐ Defete THE Change ☐ Addition NAME JOANNOU, BENJAMIN JR. NAME STREET ADORESS STREET ADDRESS 6401 SW 134 DR. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** Delete TITLE P Change **VDP** ☐ Addition NAME HILL, DWIGHT NAME 6350 SW 133 DR STREET ADDRESS STREET ADDRESS 6350 SW-113 DR CITY-ST-ZIP CITY-S1-ZIP MIAMI FL 33156 HILE ☐ Delete TITLE [] Change ☐ Addition NAME NAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DHE ☐ Delete HILL: ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SJ-ZIP

12. I hereby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or twistee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2-23-07 305-135-6321

FILED