2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768435

FILED May 12, 2008 Secretary of State

Entity Name: GEORGETOWNE SUBDIVISION HOME OWNERS ASSOCIATION, INC.

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

1400 GEORGETOWNE DRIVE 1347 GEORGETOWNE CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

1400 GEORGETOWNE DRIVE 1347 GEORGETOWNE CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34232 US

FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, DAVE WIEGAND, KATHRINE

1400 GEÓRGETOWNE DRIVE 1389 GEORGETOWNE CIRCLE SARASOTA, FL 34232 SARASOTA, FL 34232

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: KATHRINE WIEGAND 05/12/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

EVANS, NICOLE RISSER, NICOLE Name: Name: 1347 GEORGETOWNE CIRCLE Address: 1347 GEORGETOWNE CIRCLE Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

Title: VPD () Delete Title: (X) Change () Addition Name: THOMAS, DAVE Name: KRISTJANSON, MARGARET Address: 1400 GEORGETOWNE DRIVE Address: 1617 GEORGETOWNE BLVD

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

Title: () Delete Title: () Change () Addition LINDBERG, MICKY Name: Name:

1379 GEORGETOWNE CIRCLE Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip:

() Delete Title: SD Title: SD (X) Change () Addition

Name: LEWIS, JIM Name: WIEGAND, KATHRINE

1538 GEORGETOWNE LANE 1389 GEORGETOWNE CIRCLE Address: Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232

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: KATHRINE WIEGAND SD 05/12/2008