2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2012
Secretary of State

DOCUMENT# 770308

Entity Name: CONTINENTAL HIGH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2121 KILLARNEY WAY
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 11143
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-3155454 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT
2121 KILLARNEY WAY
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BROWN, JERROD
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

Title: VPD
Name: LARSON, KRISTIE
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

Title: S/T
Name: TEEL, DIXIE MAYO
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

Title: SD
Name: RIGGLE, CHRISTY
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

Title: D
Name: PEPPERS, CLAYTON
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

Title: D
Name: KILLEN, ALANA
Address: POST OFFICE BOX 11143
City-St-Zip: TALLAHASSEE, FL 32302

I hereby 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 all other like empowered.

SIGNATURE: JOANIE TROTMAN RA 01/30/2012

Electronic Signature of Signing Officer or Director — Date