2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002130

FILED Apr 28, 2008 Secretary of State

Entity Name: AUTUMN CHASE HOMEOWNERS' ASSOCIATION, INC.

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

882 JACKSON AVE. 225 S WESTMONTE DRIVE WINTER PARK, FL 32789

SUITE 3310

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

882 JACKSON AVE PO BOX 162147

ALTAMONTE SPRINGS, FL 327162147 WINTER PARK, FL 32789

FEI Number: 59-3642457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAY, KEVIN W WOMACK, ELLEN R 225 S WESTMONTE DRIVE 882 JACKSON AVE

WINTER PARK, FL 32789 US SUITE 3310 ALTAMONTE SPRINGS, FL 32714 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: ELLEN R WOMACK 04/28/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

GRESHAM, JUDY ADOLFI, AL Name: Name: 5624 AUTUMN CHASE CIR Address: 1607 WILLOW OAK LANE Address: SANFORD, FL 32773 City-St-Zip: City-St-Zip: SANFORD, FL 32773

Title: () Delete Title: (X) Change () Addition STEWART, VALERIE Name: STEWART, VALERIE Name:

Address: 5655 AUTUMN CHASE CIRCLE Address: 5655 AUTUMN CHASE CIRCLE City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773

Title: () Delete Title: (X) Change () Addition DERMINER, ROBIN GUTIERREZ, JOHN Name: Name:

1599 SILK TREE CIRCLE Address: 1649 WILLOW OAK LN Address: City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773

(X) Change () Addition Title: () Delete Title: DT Name: ADOFI, SHARON Name: DERMINER, ROBIN

Address: 1607 WILLOW LANE Address: 1649 WILLOW OAK LANE City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773

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

ANDERSON, JENNIFER Name: Name: 5745 AUTUMN CHASE CIRCLE Address: Address: City-St-Zip:

City-St-Zip: SANFORD, FL 32773

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: VALERIE STEWART DP 04/28/2008