2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # N00000003003 PROPERTY OWNERS' ASSO	CIATION, INC			94-29-2008 9	90079 044 *	***61.25
Principal Place of Business STERLING MANAGEMENT STERLING MANAGEMENT 1701-B RICKENBACKER DR SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573							
2. Principal F	lace of Business - No P.O. Box # 3. Maili	ng Address			88 (3) (11 (4) 18 (1) (1 (4)	 	. 40111 (1411 1) 11 (1 13 1
	erling Management 04 Clubhouse Drive	f, etc.		01182008 C	hg-NP	CR2E037 (12	2/06)
City	in City Center, FL 33573			4. FEI Number 59-365097	 78		Applied For Not Applicable
Zip	an only containing source		Country	5. Certificate of S			5 Additional
	6. Name and Address of Current Registere	d Āgent		7. Name and Add	ress of New Ro		Required
Name							
LAW OFF, J. R. DE FURIO, P.A. 201 EAST KENNEDY BLVD, ST 1460 TAMPA, FL 33602			Street Add	Street Address (P.O. Box Number is Not Acceptable)			
			City		·	FL Z	ip Code
8. The above	named entity submits this statement for the purpo	ose of changing its re	eaistered office or re-	gistered agent, or both, in	the State of Flor		ar with, and accept
	ions of registered agent.						
SIGNATURE				_			
	Signature, typed or printed name of registered agent and title if appli	cable. (NOTE:	Registered Agent signature r	equired when reinstating)		DATE	
` ```	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be	1	DATE ske check pay da Departmen	
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIRECTORS	9. Election Camp	paign Financing	\$5.00 May Be	Flori	ake check pay da Departmen	of State
TITLE	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIRECTORS PD	9. Election Camp	paign Financing ontribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flori GES TO OFFICER	ake check pay da Departmen	ORS IN 10 Change Oddition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIRECTORS PD CARHART, LYNN 2115 WORTHINTON GREENS DR SUN CITY CENTER, FL 33573	9. Election Camp Trust Fund Co	paign Financing ontribution. 11. IIILE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flori GES TO OFFICER	ake check pay da Departmen	ORS IN 10 Change Oddition
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

PRINTED NAME OF SIGNING OF BER OF DIRECTOR