2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

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Entity Name: CARISBROOKE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1888 BRACKENHURST PLACE
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

1888 BRACKENHURST PLACE
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 59-3663236 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OMETRIAS D. LONG & ASSOCIATES, P.A.
400 PARK AVENUE S
WINTER PARK, FL, FL 32789 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 ( ) Delete
Name: GILBERT, ED
Address: 1756 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: VD ( ) Delete
Name: COENSON, BARBARA
Address: 1895 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: TD ( ) Delete
Name: CIFERS, KRISTEN
Address: 1888 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete
Name: TOEPP, MELINDA
Address: 1858 BRACKENHURST PL
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CIFERS, KRISTEN
Address: 1888 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: VD (X) Change ( ) Addition
Name: WERTH, JIM
Address: 1865 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: SD (X) Change ( ) Addition
Name: TOEPP, MELINDA
Address: 1858 BRACKENHURST PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: T (X) Change ( ) Addition
Name: FRANA, TERRI
Address: 1900 BRACKENHURST PL
City-St-Zip: LAKE MARY, FL 32746

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: KRISTEN CIFERS PD 04/22/2008

Electronic Signature of Signing Officer or Director — Date