

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005897

FILED
Apr 15, 2008
Secretary of State

Entity Name: EDEN WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3692356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W. SR 434, STE. 5000
LONGWOOD, FL 32779 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: BASCH, CELLE
Address: 4624 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

Title: SD () Delete
Name: ASARNOW, SHERYL
Address: 4442 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

Title: TD () Delete
Name: WALLER, PHILLIP
Address: 4502 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KRAUSE, BETTY
Address: 4726 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

Title: VPD (X) Change () Addition
Name: DYER, LES
Address: 4606 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

Title: TSD (X) Change () Addition
Name: WALLER, PHILLIP
Address: 4502 PARK EDEN CIRCLE
City-St-Zip: ORLANDO, FL 32810

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: BETTY KRAUSE

PD

04/15/2008

Electronic Signature of Signing Officer or Director

Date