2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007198

FILED Apr 11, 2008 Secretary of State

Entity Name: CALABAY PARC HOMEOWNERS ASSOCIATION, INC.

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

% 272 CALABAY PARC BLVD. DAVENPORT, FL 33897

Current Mailing Address: New Mailing Address:

 % 272 CALABAY PARC BLVD.
 5955 T.G. LEE BLVD.

 DAVENPORT, FL 33897
 300

AVENPORT, FL 33897 500 ORLANDO, FL 328224457

FEI Number: 59-3696466 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FURLOW, REBECCA

8009 S. ORANGE AVE.

2180 WEST SP. 434 STE 5000

2180 WEST SR 434 STE 5000 300 ORLANDO, FL 32708 US ORLANDO, FL 328224457 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: REBECCA FURLOW 04/11/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: ROE, KEVIN Name: BARNES, CAROLINE

Address: 451 MONTARA DRIVE Address: 223 CALABAY PARC BLVD.
City-St-Zip: DAVENPORT, FL 33897 City-St-Zip: DAVENPORT, FL 33897

Title: VPD () Delete Title: VP (X) Change () Addition Name: BARNES, CAROLINE Name: HIBBERT, DAVE

Address: 223 CALABAY PARC BLVD. Address: 409 ORISTA DRIVE
City-St-Zip: DAVENPORT, FL 33837 City-St-Zip: DAVENPORT, FL 33837

Title: TD () Delete Title: T (X) Change () Addition Name: KINGSTON, TRACEY Name: KINGSTON, TRACEY

 Name:
 KINGSTON, TRACEY
 Name:
 KINGSTON, TRACEY

 Address:
 326 ORISTA DRIVE
 Address:
 326 ORISTA DRIVE

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837

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

 Name:
 CHANT, CAROL
 Name:
 YOUSEFIAN, TONY

 Address:
 704 ORISTA DRIVE
 Address:
 177 SENECA LANE

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837

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

 Name:
 Name:
 CHESTER, KEITH

 Address:
 Address:
 463 TUPELO CIRCLE

 City-St-Zip:
 City-St-Zip:
 DAVENPORT, FL 33837

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: CAROLINE BARNES P 04/11/2008