2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 17, 2008 8:00 am Secretary of State DOCUMENT # N00000007401 04-17-2008 90040 009 ****70.00 AUBURN HILLS HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 105 AUBURN COURT 105 AUBURN COURT HAINES CITY, FL 33844 HAINES CITY, FL 33844 UŞ 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142008 Cha-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 59-3739681 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAFF, TULA M 3399 CYPRESS GARDENS RD Street Address (P.O. Box Number is Not Acceptable) SUITE C WINTER HAVEN, FL 33884 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Due by May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE Addition NAME STERLING, LEE KING SR. King SR. Sterling Lee STREET ADDRESS 105 AUBURN COURT STREET ADDRESS CITY-ST-ZIP HAINES CITY, FL 33844 COY-ST-ZIP VP TITLE ☐ Delete TIT! F ☐ Change ■ Addition NAME BOSWELL, KAREN NAME 108 AUBURN COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition KING, LENITA NAME NAME STREET ADDRESS 105 AUBURN COURT STREET ADDRESS CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP SD TITLE □ Delete TITLE ☐ Change ☐ Addition DELVALLE, ROLANDO NAME NAME 107 AUBURN CT STREET ADDRESS STREET ADDRESS CITY-ST-7/P HAINES CITY, FL 33844 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete DITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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.

FILED

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