2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N01000003094

Entity Name: FOUR CORNERS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

107 N. LINE DR.
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

107
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-3720908 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA D
107 N. LINE DR.
APOPKA, FL 32703 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: GREEN, DAN
Address: 8403 S PARK CIR STE 670
City-St-Zip: ORLANDO, FL 32819 US

Title: VTD ( ) Delete
Name: ABBOT, CHRIS
Address: 8403 S PARK CIR STE 670
City-St-Zip: ORLANDO, FL 32819 US

Title: SD ( ) Delete
Name: CALL, MATT
Address: 8403 S PARK CIR STE 670
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GARAVAGLIA, BRIAN
Address: 526 CASSIA DR.
City-St-Zip: DAVENPORT, FL 33897 US

Title: VP (X) Change ( ) Addition
Name: JANKOWSKY, PETER
Address: 806 CASSIA DR.
City-St-Zip: DAVENPORT, FL 33897 US

Title: SDTD (X) Change ( ) Addition
Name: LORD, BRYSON
Address: 632 ELDERBERRY DR.
City-St-Zip: DAVENPORT, FL 33897 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN GARAVAGLIA PD 04/24/2006

Electronic Signature of Signing Officer or Director — Date