

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006020

FILED
May 19, 2008
Secretary of State

Entity Name: AUDUBON PLACE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

AUDUBON PLACE HOMEOWNERS ASSOC.
1016 ROBIN LANE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

AUDUBON PLACE HOMEOWNERS ASSOC.
1016 ROBIN LANE
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 05-0526206 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROUNTREE, JASON G
1016 ROBIN LANE
WINTER HAVEN, FL 33884 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROUNTREE, JASON
Address: 1016 ROBIN LN
City-St-Zip: WINTER HAVEN, FL 33884

Title: VD () Delete
Name: ROUNTREE, JAMIE
Address: 1016 ROBIN LN
City-St-Zip: WINTER HAVEN, FL 33884

Title: TD () Delete
Name: ADDINGTON, WILLIAM
Address: 1019 ROBIN LANE
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JASON G ROUNTREE

PD

05/19/2008

Electronic Signature of Signing Officer or Director

Date