2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02460

FILED Apr 02, 2008 Secretary of State

Entity Name: HARBOR OAKS HOMEOWNERS COOPERATIVE, INC.

Current Principal Place of Business: New Principal Place of Business: 03990 PICCIOLA RD FRUITLAND PARK, FL 34731 LIS **Current Mailing Address: New Mailing Address:** 03990 PICCIOLA RD FRUITLAND PARK, FL 34731 US FEI Number: 59-2527639 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: WEAN AND MALCHOW P.A. 646 E. COLONIAL DR ORLANDO, FL 32803 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MARGARET, ESTEP ESTEP, MARGARET Name: Name: 21 RIVERVIEW DR Address: 21 RIVERVIEW DR Address: City-St-Zip: FRUITLAND PARK, FL City-St-Zip: FRUITLAND PARK, FL Title: Title: (X) Change () Addition () Delete COLUMBO, CARL Name: SAUNIER, BRUCE Name: Address: 17 HARBOR OAKS DR Address: 16 GALLINULE City-St-Zip: FRUITLAND PARK, FL City-St-Zip: FRUITLAND PARK, FL 34731 Title: () Delete Title: (X) Change () Addition BARGER, CHADWICK ETHERIDGE, RONALD Name: Name: Address: 25 SUNRISE TRAIL Address: 8 CONTINENTIAL WAY City-St-Zip: FRUITLAND PARK, FL 34731 City-St-Zip: FRUITLAND PARK, FL 34731 Title: () Delete Title: () Change () Addition Name: PERCIVAL, SHARON Name: Address: 18 GALLINULE CT Address: City-St-Zip: FRUITLAND PARK, FL 34731 City-St-Zip: Title: () Delete Title: (X) Change () Addition MITCHUM, E. RANDALL MITCHUM, RANDALL E Name: Name: 19 SUNRISE TRAIL 19 SUNRISE TRAIL Address: Address: City-St-Zip: FRUITLAND PARK, FL 34731 City-St-Zip: FRUITLAND PARK, FL 34731 Title: () Delete Title: () Change () Addition CROMER, KENNETH Name: Name: Address: 49 HARBOR OAKS DR Address: FRUITLAND PARK, FL 34731 City-St-Zip: 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: GERI LAU MGR 04/02/2008