2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001742

FILED Mar 14, 2008 Secretary of State

Entity Name: SIMMONS RANCH ESTATES HOMEOWNERS ASSOCIATION, INC.

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

6727 SIMMONS LOOP ROAD RIVERVIEW, FL 33569 6727 SIMMONS LOOP ROAD RIVERVIEW, FL 33578

Current Mailing Address: New Mailing Address:

6727 SIMMONS LOOP ROAD RIVERVIEW, FL 33569 6727 SIMMONS LOOP ROAD RIVERVIEW, FL 33578

FEI Number: 65-1179094 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:

SIMMONS, E. GEORGE
6727 SIMMONS LOOP ROAD
RIVERVIEW, FL 33569 US
SIMMONS, E. GEORGE
6727 SIMMONS LOOP ROAD
RIVERVIEW, FL 33578 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: 03/14/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DPT () Delete
 Title:
 D/PR (X) Change () Addition

 Name:
 SIMMONS, E. GEORGE
 Name:
 SIMMONS, E. GEORGE

 Address:
 6727 SIMMONS LOOP ROAD
 Address:
 6727 SIMMONS LOOP ROAD

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33578

Title: DVS () Delete Title: D VP (X) Change () Addition Name: SIMMONS, SANDRA Name: SIMMONS, SANDRA

Address: 6727 SIMMONS LOOP ROAD Address: 6727 SIMMONS LOOP ROAD City-St-Zip: RIVERVIEW, FL 33578 RIVERVIEW, FL 33578

Title: D () Delete Title: D/TR (X) Change () Addition Name: HOGAN, CHRISTINE Name: HOGAN, CHRISTINE

Address: 10010 SIMMONS RANCH COURT Address: 10010 SIMMONS RANCH COURT

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33578

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

 Name:
 Name:
 HENRY, MICHELLE

 Address:
 Address:
 11820 LARKSONG LOOP

 City-St-Zip:
 City-St-Zip:
 RIVERVIEW, FL 33579

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: CHRISTINE HOGAN TRES 03/14/2008