2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006488

FILED Apr 28, 2008 Secretary of State

Entity Name: EAST PARK - NEIGHBORHOODS 6 & 7 HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 300		110			
ORLANDO), FL 32822	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 300		110			
URLANDO), FL 32822	US			
FEI Number:	20-0476993	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
5955 T. G. SUITE 300	IANAGEMENT LEE BLVD), FL 32822 L				
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	COLON, ANGE	IE PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ARIAS, JOSE) Delete IE PARK DRIVE 32832	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (PREFONTAINE 10244 PARK R ORLANDO, FL	OW COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BRIDGE, WILL	N PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MARTEL, RICH	INE PARK DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: REBECCA FURLOW PRES 04/28/2008