2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000008720

FILED Jun 12, 2<u>00</u>8 Secretary of State

Entity Name: SOUTH GOLDENROD PINES HOMEOWNERS ASSOCIATION, INC.

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

219 PASADENA PLACE 75 GATLIN AVE ORLANDO, FL 32803 SUITE A

ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

219 PASADENA PLACE 75 GATLIN AVE

ORLANDO, FL 32803 SUITE A

ORLANDO, FL 32806

FEI Number: 54-2150739 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:

WATSON, BARRY L ENCORE PROPERTY MANAGEMENT LLC

219 PASADENA PLACE 75 GATLIN AVE. ORLANDO, FL 32803 US SUITE A

ORLANDO, FL 32806 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: NANCY WARREN 06/12/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DPST (X) Change () Addition () Delete

WATSON, BARRY L VELASQUEZ, CARLOS Name: Name: 219 PASADENA PLACE Address: 7448 DUVAL AVE. Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32822

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

Name: Name: IGLESIAS, ENRIQUE Address: Address: 4114 YORKSHIRE CLUB CT City-St-Zip: City-St-Zip: ORLANDO, FL 32822

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

Name: SANTIAGO, ROSA Name: 4131 HANCOCK HILL CT. Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32822

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: CARLOS VELASQUEZ Ρ 06/12/2008