

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 22, 2008
Secretary of State

DOCUMENT# N03367

Entity Name: TITUSVILLE SECTION THREE PROTECTIVE ASSOCIATION, INC.**Current Principal Place of Business:**1820 FIGTREE DRIVE
TITUSVILLE, FL 32780 US**New Principal Place of Business:****Current Mailing Address:**1820 FIGTREE DRIVE
TITUSVILLE, FL 32780 US**New Mailing Address:****FEI Number:** 59-2672119**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOHNSON, CHERYL
1820 FIGTREE DRIVE
TITUSVILLE, FL 32780 US**Name and Address of New Registered Agent:**

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:** DP (X) Delete
Name: CERDA, MARIA
Address: 1720 FIGTREE DR
City-St-Zip: TITUSVILLE, FL 32780 US**Title:** DT () Delete
Name: JOHNSON, CHERYL
Address: 1820 FIGTREE DR
City-St-Zip: TITUSVILLE, FL 32780 US**Title:** DS () Delete
Name: HARNESS, AUDREY
Address: 1724 FIGTREE DR
City-St-Zip: TITUSVILLE, FL 32780 US**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: MARIA CERDA

DP

08/22/2008

Electronic Signature of Signing Officer or Director

Date