2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000632

FILED Feb 24, 2009 Secretary of State

Entity Name: HOMEOWNERS ASSOCIATION OF SISSON MEADOWS, INC. **Current Principal Place of Business: New Principal Place of Business:** 2825 BUSINESS CENTER BLVD WICKHAM BUSINESS PARK, STE C-1 MELBOURNE, FL 32940 **Current Mailing Address: New Mailing Address:** 2825 BUSINESS CENTER BLVD WICKHAM BUSINESS PARK, STE C-1 MELBOURNE, FL 32940 FEI Number: 54-2144812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SIMMS, DONALD L SIMMS, DONALD L P D 2825 BUSINESS CENTER BLVD 2825 BÚSINESS CENTER BLVD WICKHAM BUSINESS PARK, STE C-1 WICKHAM BUSINESS PARK, STE C-1 MELBOURNE, FL 32940 US MELBOURNE, FL 32940 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: DONALD L. SIMMS 02/24/2009 Electronic Signature of Registered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **OFFICERS AND DIRECTORS:** () Delete () Change () Addition SIMMS, DONALD L Name: Name: 2825 BUSINESS CENTER BLVD, STE C-1 Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MOLITOR, ROGER Name: Address: 2825 BUSINESS CENTER BLVD. STE C-1 Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition REITER, DEANNA M Name: Name: 2825 BUSINESS CENTER BLVD, STE C-1 Address: Address: City-St-Zip: MELBOURNE, FL 32940 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: DONALD L. SIMMS P D 02/24/2009