2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001736

FILED Apr 15, 2008 Secretary of State

Entity Name: CLUBSIDE POINTE HOMEOWNERS' ASSOCIATION, INC.

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

1600 WEST COLONIAL DRIVE ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

1600 WEST COLONIAL DRIVE P.O. BOX 531010 ORLANDO, FL 32853 ORLANDO, FL 32804

FEI Number: 34-1982593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MELROSE MANAGEMENT GROUP HANSON, JACK 1600 WEST COLONIAL DRIVE 1600 WEST COLONIAL DRIVE ORLANDO, FL 32804 ORLANDO, FL 32804

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: JACK HANSON 04/15/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MCCARTHY, THOMAS HEVIA, LUIS Name:

Name: 4700 MILLENIA BLVD, STE 400 Address: 3729 CLUBSIDE POINTE DRIVE Address:

City-St-Zip: ORLANDO, FL 32839 City-St-Zip: ORLANDO, FL 32810

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

Name: PETERSON, DON Name: ROACH, CYNTHIA

Address: 4700 MILLENIA BLVD, STE 400 Address: 3745 CLUBSIDE POINTE DRIVE ORLANDO, FL 32810

City-St-Zip: ORLANDO, FL 32839 City-St-Zip:

Title: STD () Delete Title: (X) Change () Addition DOWLING, LARRY

Name: STOCKFORD, MARGIE Name: 4700 MILLENIA BLVD, STE 400 3785 CLUBSIDE POINTE DRIVE Address: Address:

City-St-Zip: ORLANDO, FL 32839 City-St-Zip: ORLANDO, FL 32810

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: LUIS HEVIA PD 04/15/2008