2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# N04000005373

Entity Name: THE FIDELITY HOMES OF TALON BAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

Current Mailing Address:

P.O. 380758
MURDOCK, FL 33938

New Mailing Address:

FEI Number: 42-1633001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WISHARD, KRISTINE
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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: DO ( ) Delete
Name: HUNIHAN, DAVID C
Address: 779 COMMERCE DR. SUITE 16
City-St-Zip: VENICE, FL 34292

Title: DO ( ) Delete
Name: HUNIHAN, DAVID M
Address: 779 COMMERCE DRIVE, SUITE 16
City-St-Zip: VENICE, FL 34292

Title: DO ( ) Delete
Name: SHIPPS, PETE
Address: 13035 TAMIAMI TRIAL UNIT A
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: HUNIHAN, DAVID C
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: VP (X) Change ( ) Addition
Name: HUNIHAN, DAVID M
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

Title: PD (X) Change ( ) Addition
Name: SHIPPS, PETE
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

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: PETE SHIPPS PD 04/25/2008

Electronic Signature of Signing Officer or Director — Date