2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007658

FILED Apr 28, 2007 Secretary of State

Entity Name: HABERSHAM HOMEOWNERS ASSOCIATION, INC.

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

4281 HIGHWAY 90 4400 BAYOU BLVD PACE, FL 32571

#35

PENSACOLA, FL 32503

Current Mailing Address: New Mailing Address:

4400 BAYOU BLVD 4281 HIGHWAY 90

PENSACOLA, FL 32503

FEI Number: 20-1482702 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:

BENNETT, JERRY LONGWELL, TINA 4281 HIGHWAY 90 CENTRE GROUP PROPERTIES. INC US

4400 BAYOU BLVD #35 PACE, FL 32571 PENSACOLA, FL 32503 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: TINA LONGWELL 04/28/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PACE, FL 32571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BENNETT, JERRY JONES, WAYNE Name: Name: 4281 HIGHWAY 90 Address: 4266 ESSEX TERRACE CR Address:

City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: Title: (X) Change () Addition () Delete LIVINGS, JR., M.J. Name: MITCHELL, STEVE Name:

Address: 4281 HIGHWAY 90 Address: 5960 CROMWELL CR City-St-Zip: PACE, FL 32571 City-St-Zip: PACE, FL 32571

Title: () Delete Title: DS (X) Change () Addition LEE, CURTIS L HARTLEY, TENA L Name: Name:

Address: 5015 RENDY KAY LANE Address: 4217 BYRNWYCK PL City-St-Zip: MILTON, FL 32570 City-St-Zip: PACE, FL 32571

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

Name: Name: ZAJAC, CHRIS 4263 CHITTINGHAM DR Address: Address: City-St-Zip: City-St-Zip: PACE, FL 32571

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

WHITE, MICHAEL J Name: Name:

POB 286 Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32591

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: WAYNE JONES DP 04/28/2007