## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008909

Apr 23, 2008 Secretary of State

Entity Name: EAGLE RANCH SUBDIVISION HOMEOWNERS ASSOCIATION OF ZEPHYRHILLS, INC. **Current Principal Place of Business:** New Principal Place of Business: 38752 FEATHERING WAY 5844 OLD PASCO ROAD ZEPHYRHILLS, FL 33542 SUITE 100 WESLEY CHAPEL, FL 33544 **Current Mailing Address:** New Mailing Address: 5844 OLD PASCO ROAD 38752 FEATHERING WAY ZEPHYRHILLS, FL 33542 SUITE 100 WESLEY CHAPEL, FL 33544 FEI Number: 64-0956624 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: BURRMANN, AARON 38752 FEATHERING WAY ZEPHYRHILLS, FL 33542 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ROSSI, STEVE Name: Name: Address: 38743 FEATHERING WAY Address: City-St-Zip: ZEPHYRHILLS, FL 33542 US City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition BURRMANN, CARLA Name: Name: BURRMANN, AARON Address: 38752 FEATHERING WAY Address: 38752 FEATHERING WAY City-St-Zip: ZEPHYRHILLS, FL 33542 US City-St-Zip: ZEPHYRHILLS, FL 33542 US Title: (X) Delete Title: () Change () Addition BURRMANN, AARON Name: Name: 38750 FEATHERING WAY Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33542 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: STEVE ROSSI P 04/23/2008