2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007
Secretary of State

DOCUMENT# N04000010427

Entity Name: GARVIN OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1915 GARVIN STREET
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

1915 GARVIN STREET
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 56-2519555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STERNBERG, CHARLIE
1915 GARVIN STREET
ORLANDO, FL 32803 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: D ( ) Delete
Name: STERNBERG, CHARLIE
Address: 1915 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: MELINDA, MEMORY
Address: 1915 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: TAROMINA, STEVE
Address: 1913 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: HASAN, OMAR
Address: 1913 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: HOCHSTACH, JASON
Address: 1911 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: SCHWARTZ, TYLER
Address: 1909 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: JAMES, STERNBERG
Address: 1915 GARVIN STREET
City-St-Zip: ORLANDO, FL 32803

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: OMAR HASAN D 03/12/2007

Electronic Signature of Signing Officer or Director — Date