2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000010444

T FILED
Jul 24, 2009
Secretary of State

Entity Name: SLEEPY HOLLOW FIRST ADDITION HOMEOWNERS' ASSOCIATION OF LAKE COUNTY, INC.

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

206 ELM AVE. 206 S. ELM AVE. SANFORD, FL 32771 SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

P.O. BOX 1569 SANFORD, FL 32772

FEI Number: 20-1908100 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:

ALL ABOUT MANAGEMENT, INC.

206 ELM AVENUE

SANFORD, FL 32771 US

ALL ABOUT MANAGEMENT, INC.

206 S. ELM AVENUE

SANFORD, FL 32771 US

SANFORD, FL 32771 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: 07/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: () Change () Addition Name: MAUK, JOE Name:

 Name:
 MAUK, JOE
 Name:

 Address:
 179 PATRICE HOPE
 Address:

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: SHARFF, ANDREW Name: HYER, JAMES

Address: 208 ROUND MAN Address: 183 PATRICE HOPE
City-St-Zip: LEESBURG, FL 34748 City-St-Zip: LEESBURG, FL 34748

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

 Name:
 AMOS, LINDA SUE
 Name:
 SINGH, MALINA

 Address:
 2713 SAVANNAH DRIVE
 Address:
 2621 ATHENS DR

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

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: TOM TEMPFER MGR 07/24/2009