

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 18, 2008
Secretary of State

DOCUMENT# N04000010461

Entity Name: ADDISON PLACE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**206 ELM AVE
SANFORD, FL 32771**New Principal Place of Business:**2251 WOLF RIDGE LANE
MT DORA, FL 32757**Current Mailing Address:**P.O. BOX 1569
SANFORD, FL 32772**New Mailing Address:**2251 WOLF RIDGE LANE
MT DORA, FL 32757**FEI Number:** 20-1908713**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALL ABOUT MANAGEMENT INC.
206 ELM AVENUE
SANFORD, FL 32771 US**Name and Address of New Registered Agent:**BOOTH, MARY PRES
2251 WOLF RIDGE LANE
MT DORA, FL 32757 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: MARY BOOTH

12/18/2008

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** PRES () Delete
Name: BOOTH, MARY
Address: 2251 WOLF RIDGE LANE
City-St-Zip: MT DORA, FL 32757**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
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: MARY BOOTH

PR

12/18/2008

Electronic Signature of Signing Officer or Director_____
Date