2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010833

FILED Apr 25, 2007 Secretary of State

Entity Name: STORYBOOK ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
13329 WHITMARSH ST SPRING HILL, FL 34609			13591 E LINDEN SPRING HILL, FL	13591 E LINDEN SPRING HILL, FL 34609	
Current M	lailing Address	s:	New Mailing Ad	New Mailing Address:	
13329 WHITMARSH ST SPRING HILL, FL 34609			13591 E LINDEN SPRING HILL, FL	13591 E LINDEN SPRING HILL, FL 34609	
El Number	: 20-1907398	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Addre	ess of New Registered Agent:	
13329 WH SPRING H	ILL, CHRIS D HITMARSH ST HILL, FL 34609	US	purpose of abanging its regi	stered office or registered agent, or both,	
	e of Florida.	ubiliits tiiis statement loi tiie ļ	ourpose of changing its regi	stered office of registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CH/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	D () Delete SHEMWELL, CHRIS D 13329 WHITMARSH ST SPRING HILL, FL 34609		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () SHEMWELL, RO 13329 WHITMAI SPRING HILL, F	RSH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () PERRY, CAROL 13329 WHITMAI SPRING HILL, F	RSH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROXANN G. SHEMWELL D 04/25/2007