2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002470

FILED Aug 28, 2006 Secretary of State

Entity Name: SUTTON PLACE TOWNHOME OWNERS ASSOCIATION, INC.

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

385 DOUGLAS AVENUE 2301 LUCIEN WAY **SUITE 2000** SUITE 400

ALTAMONTE SPRINGS, FL 32714 MAITLAND, FL 32751

Current Mailing Address: New Mailing Address:

385 DOUGLAS AVENUE 2301 LUCIEN WAY **SUITE 2000** SUITE 400

ALTAMONTE SPRINGS, FL 32714 MAITLAND, FL 32751

FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONTEX REAL ESTATE CORPORATION CENTEX REAL ESTATE CORPORATION

385 DOUGLAS AVENUE 2301 LUCIEN WAY

SUITE 2000 SUITE 400

ALTAMONTE SPRINGS, FL 32714 US MAITLAND, FL 32751 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: PATRICK KNIGHT 08/28/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SHEELER, LAWRENCE M BONTRAGER, THOMAS K Name: Name: 385 DOUGLAS AVENUE, SUITE 2000 Address: 2301 LUCIEN WAY, SUITE 400 Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: MAITLAND, FL 32751

(X) Change () Addition Title: () Delete Title: LUNDEQUAM, BRETT Name: SHEELER, LAWRENCE M Name: Address: 385 DOUGLAS AVENUE, SUITE 2000 Address: 2301 LUCIEN WAY, SUITE 400

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: MAITLAND, FL 32751

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

RIGGS, DEBRA Name: RIGGS, DEBRA Name:

385 DOUGLAS AVENUE, SUITE 2000 2301 LUCIEN WAY, SUITE 400 Address: Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: MAITLAND, FL 32751

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: THOMAS K. BONTRAGER PD 08/28/2006