

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2008
Secretary of State**

DOCUMENT# N05000005281

Entity Name: LA CITA HILL TOP ASSOCIATION, INC.

Current Principal Place of Business:

1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780

New Mailing Address:

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

Name and Address of Current Registered Agent:

EVANS, JOHN H
1702 S. WASHINGTON AVE.
TITUSVILLE, FL 32780 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: PD () Delete
Name: SMITH, WALTER R
Address: 5300 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32809

Title: VSTD () Delete
Name: SMITH, RAINEY
Address: 5300 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: SMITH, CODY
Address: 5300 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: W. ROGER SMITH

P

01/17/2008

Electronic Signature of Signing Officer or Director

_____ Date