## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000005532

FILED Apr 28, 2008 Secretary of State

Entity Name: GOTHA VILLAGE HOMEOWNERS ASSOCIATION, INC.

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

8857 LAKE FLORENCE BLVD. 6038 PINE VALLEY DRIVE ORLANDO, FL 32818 US ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

8857 LAKE FLORENCE BLVD.

ORLANDO, FL 32818 US

6038 PINE VALLEY DRIVE
ORLANDO, FL 32819 US

FEI Number: 26-4855825 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:

ROBERTS, DANIEL L
8857 LAKE FLORENCE BLVD.
ORLANDO, FL 32818 US
ROBERTS, DANIEL L
6038 PINE VALLEY DRIVE
ORLANDO, FL 32819 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: DAN ROBERTS 04/28/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ROBERTS, DANIEL L
 Name:
 ROBERTS, DANIEL L

 Address:
 8857 LAKE FLORENCE BLVD.
 Address:
 6038 PINE VALLEY DRIVE

Address: 8857 LAKE FLORENCE BLVD. Address: 6038 PINE VALLEY DRIVE City-St-Zip: ORLANDO, FL 32818 US City-St-Zip: ORLANDO, FL 32819 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: ROBERTS, RITA Name: ROBERTS, RITA

 Address:
 8857 LAKE FLORENCE BLVD.
 Address:
 6038 PINE VALLEY DRIVE

 City-St-Zip:
 ORLANDO, FL 32818 US
 City-St-Zip:
 ORLANDO, FL 32819 US

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

Name:ROBERTS, JEFFREY AName:ROBERTS, JEFFREY AAddress:8857 LAKE FLORENCE BLVD.Address:6038 PINE VALLEY DRIVECity-St-Zip:ORLANDO, FL 32818 USCity-St-Zip:ORLANDO, FL 32819

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: DANIEL L ROBERTS D 04/28/2008