## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000010303

**FILED** Jul 23, 2007 Secretary of State

Entity Name: APIARY POINTE HOMEOWNERS ASSOCIATION, INC.

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

2100 LAKE EUTIS DRIVE 300 COLONIAL CENTER PARKWAY

TAVARES, FL 32778 SUITE 200

LAKE MARY, FL 32756

**Current Mailing Address:** New Mailing Address:

2100 LAKE EUTIS DRIVE 300 COLONIAL CENTER PARKWAY

SUITE 200 TAVARES, FL 32778

LAKE MARY, FL 32756

FEI Number: 20-5031250 FEI Number Applied For ( ) 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:

SHAMROCK, KEITH J 2100 LAKE EUTIS DRIVE TAVARES, FL 32778

WILLS, ERIC 300 CÓLONIAL CENTER PARKWAY SUITE 200

LAKE MARY, FL 32756 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: ERIC WILLS 07/23/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

SHAMROCK, KEITH J WILLS, ERIC Name: Name: 2100 LAKE EUTIS DRIVE Address: 300 COLONIAL CENTER PARKWAY (SUITE 200) Address:

TAVARES, FL 32778

City-St-Zip: City-St-Zip: LAKE MARY, FL 32756

Title: () Delete Title: (X) Change ( ) Addition BROWN, FRED

Name: Name: ANDERSON, KATIE Address: 2100 LAKE EUTIS DRIVE Address:

300 COLONIAL CENTER PARKWAY LAKE MARY, FL 32756

City-St-Zip: TAVARES, FL 32778 City-St-Zip:

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

Name: DRIVER, BEN Name:

300 COLONIAL CENTER PARKWAY Address: Address:

City-St-Zip: City-St-Zip: LAKE MARY, FL 32756

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: ERIC WILLS **PRES** 07/23/2007