2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0600000318

FILED May 01, 2007 Secretary of State

Entity Name: ALEXANDER WOODS TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

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

6152 DELANCEY STATION, SUITE 105 1390 LAKE JOSEPHINE DR

RIVERVIEW, FL 33569 SEBRING, FL 33875

Current Mailing Address: New Mailing Address:

6152 DELANCEY STATION, SUITE 105 1390 LAKE JOSEPHINE DR RIVERVIEW, FL 33569 SEBRING, FL 33875

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SMITH, KEITH C ESQUIRE

121 NORTH COLLINS STREET

PLANT CITY, FL 33564 US

HIGH, PATRICK

1390 LAKE JOSEPHINE DR.

SEBRING, FL 33875 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 HIGH 05/01/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: EVERIDGE, WILLIAM C Name: HIGH, PATRICK
Address: 1903 MASTERS WAY Address: 1390 LAKE JOSEPHINE DR.

City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: SEBRING, FL 33875

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

 Name:
 ABRAHAM, PETER
 Name:
 CHITTY, GLEN

 Address:
 6152 DELANCEY STATION, SUITE 105
 Address:
 113 S. VALRICO RD.

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 VALRICO, FL 33594

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 MASSARO, JOSEPH J
 Name:
 JAFFER, ANIL

 Address:
 3510 SHADOWOOD DRIVE
 Address:
 113 S. VALRICO RD

 City-St-Zip:
 VALRICO, FL 33594
 City-St-Zip:
 SEBRING, FL 33594

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: PATRICK HIGH D 05/01/2007