2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000000751

FILED Oct 09, 2012 Secretary of State

Entity Name: HARBOR PINES HOMEOWNERS ASSOCIATION OF LAKE COUNTY, INC.

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

221 WALTON HEATH DRIVE 2126 BRIARCLIFF CIRCLE ORLANDO, FL 32828 MT DORA, FL 32757

Current Mailing Address: New Mailing Address:

221 WALTON HEATH DRIVE P.O. BOX 1214 ORLANDO, FL 32828 MT DORA, FL 32756

FEI Number: 26-0483704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PROPERTY FIRST, INC MORRIS, KENNETH 221 WALTON HEATH DRIVE 2126 BRIARCLIFF CIRCLE ORLANDO, FL 32828 MT DORA, FL 32757

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: KENNETH MORRIS 10/09/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

GOULD, CARRIE Name: Address: P.O. BOX 1214

City-St-Zip: MOUNT DORA, FL 32756

Title:

Name: MORRIS, KENNETH Address: P.O. BOX 1214 MOUNT DORA, FL 32756 City-St-Zip:

Title:

ROMAN, CELSA P Name: Address: P.O. BOX 1214

City-St-Zip: MOUNT DORA, FL 32756

Title: TR

PADILLA, VANESSA Name: P.O. BOX 1214 Address: City-St-Zip: MOUNT DORA, FL 32756

Title:

ANDERSON, JOSH Name: P.O. BOX 1214 Address:

MOUNT DORA, FL 32756 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: CARRIE GOULD Ρ 10/09/2012