2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000008445

TI FILED
Feb 18, 2008
Secretary of State

Entity Name: MITCHELL SQUARE HOMEOWNERS ASSOCIATION, INC.

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

10080 BUCK POINT ROAD 1472 MITCHELL AVENUE TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

10080 BUCK POINT ROAD 1472 MITCHELL AVENUE TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32303

FEI Number: 51-0626560 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

WORLEY, MARK

10080 BUCK POINT ROAD

TALLAHASSEE, FL 32312 US

O'NEAL, JOHN L

1472 MITCHELL AVENUE

TALLAHASSEE, FL 32303 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: JOHN L. O'NEAL 02/18/2008

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

TALLAHASSEE, FL 32312

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

TALLAHASSEE, FL 32303

Title: PD () Delete Title: PRES (X) Change () Addition Name: WORLEY, MARK Name: DOBSON, STEPHEN

Address: 10080 BUCK POINT ROAD Address: 1478 MITCHELL AVE
City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32303

Title: VPD () Delete Title: TREA (X) Change () Addition Name: WORLEY, RAMONA Name: O'NEAL, JOHN L

Address: 10080 BUCK POINT ROAD Address: 1472 MITCHELL AVENUE

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

 Name:
 HALL, PRESTON
 Name:

 Address:
 2065 THOMASVILLE RD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:

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

 Name:
 WORLEY, AMBER
 Name:

 Address:
 10080 BUCK POINT ROAD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 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: JOHN L. O'NEAL TREA 02/18/2008