2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N06000011415

Entity Name: MCCORMICK WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3100 CLAY AVENUE
SUITE 275
ORLANDO, FL 32804

New Principal Place of Business:

1600 W. COLONIAL DRIVE
ORLANDO, FL 32804

Current Mailing Address:

3100 CLAY AVENUE
SUITE 275
ORLANDO, FL 32804

New Mailing Address:

1600 W. COLONIAL DRIVE
ORLANDO, FL 32804

FEI Number: 20-8068825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 322025017 US

Name and Address of New Registered Agent:

HANSON, JACK
1600 W. COLONIAL DRIVE
ORLANDO, FL 32804 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: JACK HANSON 04/27/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KRAMER, STUART A
Address: 3100 CLAY AVENUE, SUITE 275
City-St-Zip: ORLANDO, FL 32804

Title: VTD ( ) Delete
Name: HAMNER, DWAYNE R
Address: 3100 CLAY AVENUE, SUITE 275
City-St-Zip: ORLANDO, FL 32804

Title: SD (X) Delete
Name: LEVY, EVELYN
Address: 3100 CLAY AVENUE, SUITE 275
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ROSSER, STEVE
Address: 4700 MILLENIA BOULEVARD
City-St-Zip: ORLANDO, FL 32839

Title: ( ) Change ( ) Addition
Name:
Address:
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: STUART A KRAMER PD 04/27/2009
Electronic Signature of Signing Officer or Director — Date