

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000342

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** HOWELL BRANCH COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

700 WEST MORSE BOULEVARD  
SUITE 220  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

700 WEST MORSE BOULEVARD  
SUITE 220  
WINTER PARK, FL 32789

**New Mailing Address:**

PO BOX 941688  
MAITLAND, FL 32794

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 NORTH ORANGE AVENUE  
SUITE 1400  
ORLANDO, FL 32801 US

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

CS SUNBIZ, LLC  
1551 SANDSPUR ROAD  
MAITLAND, FL 32751 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: KERREY CARPENTER

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CULP, SCOTT W  
Address: 700 WEST MORSE BOULEVARD #220  
City-St-Zip: WINTER PARK, FL 32789

Title: VD  
Name: PRICE, DEAN  
Address: 700 WEST MORSE BOULEVARD #220  
City-St-Zip: WINTER PARK, FL 32789

Title: STD  
Name: MISSIGMAN, PAUL  
Address: 700 WEST MORSE BOULEVARD #220  
City-St-Zip: WINTER PARK, FL 32789

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: W. SCOTT CULP

P

04/24/2012

Electronic Signature of Signing Officer or Director

Date