

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12466

FILED
Mar 01, 2007
Secretary of State

Entity Name: OLD HILLSBOROUGH ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 2081
SEFFNER, FL 33584

New Principal Place of Business:

HALTON CIRCLE
SEFFNER, FL 33583

Current Mailing Address:

P O BOX 2081
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-2816940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONAEO SINGRES
306 HALTON CIRCLE
SEFFNER, FL 33584 US

Name and Address of New Registered Agent:

DELOR, PHILLIP
303 HALTON CIRCLE
SEFFNER, FL 33584 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: PHIL DELOR

03/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: RICH, JEAN
Address: 310 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: P () Delete
Name: GINGRAS, RONALD
Address: 306 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: S () Delete
Name: PAFUNDA, JEFF
Address: 308 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: VP () Delete
Name: JONES, CORNELIA
Address: 302 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: JONES, CORNELIA
Address: 302 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: P (X) Change () Addition
Name: DELOR, PHILLIP
Address: 303 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: S (X) Change () Addition
Name: COLLETTE, EVA E MRS
Address: 311 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

Title: VP (X) Change () Addition
Name: GABRIEL, JIM
Address: 220 HALTON CIRCLE
City-St-Zip: SEFFNER, FL 33584

I hereby certify that the information supplied with this filing does not qualify for the 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: EVA ELIZABETH COLLETTE

S

03/01/2007

Electronic Signature of Signing Officer or Director

Date