2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13292

FILED Apr 29, 2008 Secretary of State

Entity Name: COLONY IN THE WOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4000 SOUTH CLYDE MORRIS BLVD. PORT ORANGE, FL 32129 **Current Mailing Address: New Mailing Address:** 4000 SOUTH CLYDE MORRIS BLVD. PORT ORANGE, FL 32129 FEI Number: 59-2891606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VAN ORDEN, CONNIE HAGENDOORN, CRAIG M 88 SPRUCE IN THE WOOD 36 CEDAR IN THE WOOD US US PORT ORANGE, FL 32129 PORT ORANGE, FL 32129 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: CRAIG M. HAGENDOORN 04/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TRD () Delete () Change () Addition LOB, MYRNA M Name: Name: 68 CEDAR IN THE WD Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: () Delete Title: (X) Change () Addition VAN ORDEN, CONNIE Name: HAGENDOORN, CRAIG M Name: Address: 88 SPRUCE IN THE WOOD Address: 36 CEDAR IN THE WOOD City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129 Title: VPD () Delete Title: () Change () Addition MCGAREY, JAMES E Name: Name: Address: 32 CEDAR IN THE WOOD Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: () Delete Title: () Change () Addition Name: JADGE, ARLINE Name: Address: 53 MAPLE IN THE WOOD Address: City-St-Zip: PORT ORANGE, FL 32129 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: CRAIG M HAGENDOORN PRES 04/29/2008