2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# N13625

Entity Name: PADDOCKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 4411
PLANT CITY, FL 335644411

New Principal Place of Business:

1603 STIRRUP CT.
PLANT CITY, FL 33566

Current Mailing Address:

P.O. BOX 4411
PLANT CITY, FL 335644411

New Mailing Address:

FEI Number: 59-2642035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARAMUS, TOM
C/O WLCA-1514 S. ALEXANDER ST., STE. 106
STE. 106
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

DARAMUS, TOM
C/O WLCA-1514 S. ALEXANDER ST.,
STE. 106
PLANT CITY, FL 33563 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: _____ 01/20/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BASSETT, CAROL
Address: 1603 STIRRUP COURT
City-St-Zip: PLANT CITY, FL 33566

Title: V ( ) Delete
Name: SELLS, GEORGE
Address: 1605 STIRRUP CT.
City-St-Zip: PLANT CITY, FL 33566

Title: S ( ) Delete
Name: TERRY, EVELYN
Address: 2606 BRIDLE DRIVE
City-St-Zip: PLANT CITY, FL 33566

Title: T (X) Delete
Name: BASSETT, CAROL
Address: 1603 STIRRUP CT
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change ( ) Addition
Name: BASSETT, CAROL A
Address: 1603 STIRRUP COURT
City-St-Zip: PLANT CITY, FL 33566

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

Title: PRES (X) Change ( ) Addition
Name: KANTROWITZ, SCOTT
Address: 1806 SAGEBRUSH ROAD
City-St-Zip: PLANT CITY, FL 33566

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: CAROL A BASSETT TREA 01/20/2009
Electronic Signature of Signing Officer or Director — Date