

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15553

FILED
Jan 05, 2008
Secretary of State

Entity Name: CARMEL PARK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2550 NORTH DEAN ROAD
ORLANDO, FL 328172798

New Principal Place of Business:

CARMEL PARK HOA
P.O. BOX 677981
ORLANDO, FL 32867

FEI Number: 59-2686780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYATT-MCCOY, MELINDA
2400 OLIVE BRANCH WAY
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

HYATT, MELINDA
2400 OLIVE BRANCH WAY
ORLANDO, FL 32817 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: MELINDA HYATT

01/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HYATT- MCCOY, MELINDA
Address: 2400 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

Title: DS () Delete
Name: DIAZ, DORALIZA
Address: 2417 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

Title: DT () Delete
Name: HUCKLE, ELIZABETH
Address: 2504 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

Title: D () Delete
Name: MOORE, JOHN
Address: 2454 LONG MEADOW WAY
City-St-Zip: ORLANDO, FL 32817

Title: D () Delete
Name: DOERFLEIN, ELLEN
Address: 9708 GILBOA WAY
City-St-Zip: ORLANDO, FL 32817

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HYATT, MELINDA
Address: 2400 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

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

Title: DT (X) Change () Addition
Name: HUCKLE, PEGGY
Address: 2504 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

Title: D (X) Change () Addition
Name: CAREW, RITA
Address: 2516 OLIVE BRANCH WAY
City-St-Zip: ORLANDO, FL 32817

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: MELINDA HYATT

DP

01/05/2008

Electronic Signature of Signing Officer or Director

Date