2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16957

Apr 01, 2009 Secretary of State

Entity Name: THE ARBORS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11308 LINARBOR PLACE

TEMPLE TERRACE, FL 33617 US

Current Mailing Address: New Mailing Address:

11308 LINARBOR PLACE

TEMPLE TERRACE, FL 33617 US

FEI Number: 59-2780469 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:

WIGGINS, JESSE P 11308 LINARBOR PLACE TEMPLE TERRACE, FL 33617 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WIGGINS, JESSE P WIGGINS, JESSE P Name: Name:

11308 LINARBOR PLACE Address: 11308 LINARBOR PLACE Address: City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: PD () Delete Title: PD (X) Change () Addition VEIT, TOM Name: VEIT, TOM Name:

Address: 11310 LINARBOR PL Address: 11310 LINARBOR PL

City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: SD Title: SD (X) Change () Addition () Delete

GIASI, ALINA LITTELL, DAN Name: Name:

11316 LINARBOR PLACE Address: Address: 11404 LINARBOR PLACE City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: () Delete Title: (X) Change () Addition

Name: LITTELL, DAN Name: SMITH, CONNIE 11404 LINARBOR PL Address: Address: 11410 LINARBOR PL

City-St-Zip: TEMPLE TERRACE, FL 33617 City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: () Delete Title: (X) Change () Addition

DETRE, AARON L DETRE, AARON L Name: Name: 11318 LINARBOR PL 11318 LINARBOR PL Address: Address:

TEMPLE TERRACE, FL 33617 US City-St-Zip: TEMPLE TERRACE, FL 33617 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: JESSE P. WIGGINS TD 04/01/2009