2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N20949

Entity Name: HIAWASSEE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2755 BORDER LAKE RD
STE 101
APOPKA, FL 32703 US

New Principal Place of Business:

Current Mailing Address:

2755 BORDER LAKE RD
STE 101
APOPKA, FL 32703 US

New Mailing Address:

FEI Number: 59-2880282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANAGA, MERIDYTHE
2755 BORDER LAKE RKD
STE 101
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CARROLL, DANIYEL
Address: 6572 MERITMOOR CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete
Name: CALDWELL, MONA
Address: 6516 MERITMOOR CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: DVP ( ) Delete
Name: TURNER, YVONNE
Address: 6534 MERITMOOR CIR
City-St-Zip: ORLANDO, FL 32818

Title: DST ( ) Delete
Name: HANKINS, KAREN
Address: 6529 MERITMOOR CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition
Name: TURNER, YVONNE
Address: 6534 MERITMOOR CIR
City-St-Zip: ORLANDO, FL 32818

Title: DS (X) Change ( ) Addition
Name: HASKINS, KAREN
Address: 6529 MERITMOOR CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: DVP ( ) Change (X) Addition
Name: HAYE, JANET
Address: 6580 MERITMOOR CIRCLE
City-St-Zip: ORLANDO, FL 32818

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: KAREN HASKINS DS 04/30/2007

Electronic Signature of Signing Officer or Director — Date