2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20949

FILED Apr 11, 2008 Secretary of State

Entity Name: HIAWASSEE POINT HOMEOWNERS ASSOCIATION, INC.

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

2755 BORDER LAKE RD STE 101

APOPKA, FL 32703

New Mailing Address: Current Mailing Address:

2755 BORDER LAKE RD STE 101 APOPKA, FL 32703 US

FEI Number: 59-2880282 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:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete CARROLL, DANIYEL Name: CARROLL, DANIYEL Name: 6572 MERITMOOR CIRCLE Address: 6572 MERITMOOR CIRCLE Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818

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

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

TURNER, YVONNE TURNER, YVONNE Name: Name: 6534 MERITMOOR CIR 6534 MERITMOOR CIR Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: ORLANDO, FL 32818

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

Name: HASKINS, KAREN Name: 6529 MERITMOOR CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip:

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

HAYE, JANET Name: Name: 6580 MERITMOOR CIRCLE Address: Address: City-St-Zip: ORLANDO, FL 32818 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: YVONNE TURNER DST 04/11/2008

Electronic Signature of Signing Officer or Director

Date