2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29522

FILED Feb 17, 2011 Secretary of State

Entity Name: TOWNHOMES NORTH AT PORT ORANGE HOMEOWNERS' ASSOCIATION, INC.

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

1190 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119

Current Mailing Address: New Mailing Address:

US

1190 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119 US

FEI Number: 59-3000990 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:

BARKIN, MICHELE J CAM 1190 PELICAN BAY DRIVE DAYTONA BEACH, FL 32119 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:

Title: F

Name: GOODRICH, DORIS

Address: 3527 D FOREST BRANCH DR City-St-Zip: PORT ORANGE, FL 32129

Title: VP

Name: BROWN, JEAN

Address: 3533 E FOREST BRANCH DR City-St-Zip: PORT ORANGE, FL 32129

Title: D

Name: HARRIDGE, STEVE

Address: 3533 B FOREST BRANCH DR City-St-Zip: PORT ORANGE, FL 32129

Title: D

Name: GOULET, GEORGE

Address: 3530 C FOREST BRANCH DR
City-St-Zip: PT ORANGE, FL 32129

Title: D

Name: NETTLES, DONALD L
Address: 3533 C FOREST BRANCH DR
City-St-Zip: PORT ORANGE, FL 32129

Title: ST

Name: PROFETA, GINA

Address: 3727 E FOREST BRANCH DRIVE City-St-Zip: PORT ORANGE, FL 32129

I hereby 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 all other like empowered.

SIGNATURE: DORIS GOODRICH PD 02/17/2011