2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008
Secretary of State

DOCUMENT# N31485

Entity Name: LINENE ESTATES HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2818 GREEN FOREST LANE
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

2841 GREEN FOREST LANE
TALLAHASSEE, FL 32312 US

Current Mailing Address:

2818 GREEN FOREST LANE
TALLAHASSEE, FL 32312 US

New Mailing Address:

2841 GREEN FOREST LANE
TALLAHASSEE, FL 32312

FEI Number: 59-3573931 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRABB, DANIEL T
2818 GREEN FOREST LANE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

MIDDLEBROOKS, BRUCE
2841 GREEN FOREST LANE
TALLAHASSEE, FL 32312 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: BRUCE MIDDLEBROOKS 04/25/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROLLINS, ALAN
Address: 2833 GREEN FOREST LN
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: STITCH, CRINNY
Address: 2874 GREEN FOREST
City-St-Zip: TALLAHASSEE, FL

Title: ST ( ) Delete
Name: CRABB, DANIEL T
Address: 2818 GREEN FOREST
City-St-Zip: TALLAHASSEE, FL

Title: VD ( ) Delete
Name: GRUBBS, JACK
Address: 2834 GREEN FOREST LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: FLETCHER, JOHN
Address: 2850 GREEN FOREST LN
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ROLLINS, ALAN C
Address: 2833 GREEN FOREST LN
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Change ( ) Addition
Name: STITCH, CRINNY
Address: 2874 GREEN FOREST
City-St-Zip: TALLAHASSEE, FL 32312

Title: ST (X) Change ( ) Addition
Name: MIDDLEBROOKS, BRUCE
Address: 2841 GREEN FOREST
City-St-Zip: TALLAHASSEE, FL 32312

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

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: ALAN C. ROLLINS MR. 04/25/2008
Electronic Signature of Signing Officer or Director Date