2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34927

FILED Apr 14, 2008 Secretary of State

Entity Name: JOANNA PARK PLACE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
107 N. LINE APOPKA, F		US			
Current Mailing Address:			New Maili	New Mailing Address:	
107 N. LINE DR. APOPKA, FL 32703		US			
FEI Number: 59-3111276		FEI Number Applied For()	FEI Number Not Appl	umber Not Applicable () Certificate of Status Desired ()	
Name and	Address of	f Current Registered Agent:	Name and	Address of New Registered Agent:	
107 N. LINE APOPKA, F The above	FL 32703 named entit	US	e purpose of changing i	ts registered office or registered agent, or both,	
in the State					
SIGNATUR		conia Signatura of Bagistarad A	aont	 Date	
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS:			_		
		CTORS:		IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LANDRY, RO	CPLACE BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	ORTH, BILL	() Delete WIEW AVENUE 32736 US	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition BERRY, EARL 34020 PARKVIEW AVE. EUSTIS, FL 32736 US	
Title: Name: Address: City-St-Zip:	OMALLEY, N	CPLACE BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D BERRY, EAF 34020 PARK EUSTIS, FL	VIEW AVE.	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition DELUCA, JULIE 19004 PARK PLACE BLVD EUSTIS, FL 32736 US	
Title: Name: Address: City-St-Zip:	DELUCA, JU	CPLACE BLVD	Title: Name: Address: City-St-Zip:	D (X) Change () Addition WARE, JIL 19651 SPRING OAK DR. EUSTIS, FL 32736 US	

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: RON LANDRY PD 04/14/2008