2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N35220

Entity Name: BURNING TREE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8613 BURNING TREE CIR.
SEMINOLE, FL 34647 US

New Principal Place of Business:

Current Mailing Address:

8674 BURNING TREE CIR
SEMINOLE, FL 33777 US

New Mailing Address:

8608 BURNING TREE CIR
SEMINOLE, FL 33777 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRIECO, DANIEL J.
19139 GULF BLVD
INDIAN SHORES FL, FL 34635 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: D ( ) Delete
Name: POWER, SHARI
Address: 8674 BURNING TREE CIRCLE
City-St-Zip: SEMINOLE, FL 33777

Title: D ( ) Delete
Name: ST. LOUIS, TODD
Address: 8608 BURNING TREE CIR.
City-St-Zip: SEMINOLE, FL 33777

Title: D ( ) Delete
Name: ANDERSON, DARRIN
Address: 8655 BURNINGTREE CIR
City-St-Zip: SEMINOLE, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCHMIDT, WAYNE
Address: 8614 BURNING TREE CIRCLE
City-St-Zip: SEMINOLE, FL 33777

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

Title: D (X) Change ( ) Addition
Name: ST LOUIS, DONNA
Address: 8608 BURNING TREE CIR
City-St-Zip: SEMINOLE, FL 33777

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: TODD ST. LOUIS TRSR 04/28/2008

Electronic Signature of Signing Officer or Director — Date