2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36839

FILED Apr 17, 2009 Secretary of State

Entity Name: FISH HAVEN MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 500 N. MAITLAND AVE FISH HAVEN LODGE SUITE 203 201 FISH HAVEN RD. MAITLAND, FL 32751 AUBURNDALE, FL 33823 US **Current Mailing Address: New Mailing Address:** FISH HAVEN LODGE 618 LINDA LANE AUBURNDALE, FL 33823 US FEI Number: 59-2990534 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: BREHR, DONALD E 355 HAVENDALE BLVD AUBURNDALE, FL 33823 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: () Delete () Change () Addition KEARNEY, SYBIL Name: Name: 664 LINDA LANE Address: Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: Title: () Delete Title: (X) Change () Addition HOVAKA, CHARLES Name: CLARK, DOUGLAS Name: Address: 677 LINDA LANE Address: 605 LINDA LANE City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823 Title: () Delete Title: () Change () Addition ERDLEY, DIANNE Name: Name: 288 FISH HAVEN RD. Address: Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: Title: TD () Delete Title: () Change () Addition MONTGOMERY, PEGGY Name: Name: Address: 618 LINDA LANE Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: Title: () Delete Title: (X) Change () Addition DOUGLAS, CLARK HOVORKA, CHARLES Name: Name: 6051 LINDA LANE 677 LINDA LANE Address: Address: City-St-Zip: ALTURAS, FL 33820 City-St-Zip: AUBURNDALE, FL 33823 Title: () Delete Title: (X) Change () Addition ETZKORN, LOUIS ETZKORN, LOUIS Name: Name: Address: LINDA LN Address: 200 LINDA LN AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 City-St-Zip: 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: PEGGY MONTGOMERY TD 04/17/2009