2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37137

FILED Apr 30, 2007 Secretary of State

Entity Name: PH HOMEOWNERS' ASSOCIATION, INC.

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

6767 N. WICKHAM RD 1978 ROCKLEDGE BLVD

SUITE 213 SUITE 106

MELBOURNE, FL 32940 US ROCKLEDGE, FL 32955 US

Current Mailing Address: New Mailing Address:

PO BOX 410759 1978 ROCKLEDGE BLVD.

MELBOURNE, FL 32941 US SUITE 106

ROCKLEDGE, FL 32955 US

FEI Number: 59-3168265 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:

ADVANCED PROPERTY MANAGEMENT ADVANCED PROPERTY MANAGEMENT

6767 N. WICKHAM RD 1978 ROCKLEDGE BLVD

SUITE 213 SUITE 106
MELBOURNE, FL 32940 US ROCKLEDGE, FL 32955 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: VAN C. MOORE 04/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VP () Delete Title: VD (X) Change() Addition

 Name:
 REEVES, JOE
 Name:
 REEVES, JOE

 Address:
 916 PELICAN LANE
 Address:
 916 PELICAN LANE

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 ROCKLEDGE, FL 32955

Title: S () Delete Title: TD (X) Change () Addition Name: KING, JENNIFER Name: KING, JENNIFER

Name:KING, JENNIFERName:KING, JENNIFERAddress:1020 PELICAN LANEAddress:1020 PELICAN LANECity-St-Zip:ROCKLEDGE, FL 32955City-St-Zip:ROCKLEDGE, FL 32955

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 PROSSER, KIM
 Name:
 DASKI, DUANE

 Address:
 1041KINGFISHER WAY
 Address:
 1045 PELICAN LANE

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 ROCKLEDGE, FL 32955

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 KAMINSKI, RICH
 Name:
 KAMINSKI, RICHARD

 Address:
 921 OSPREY LANE
 Address:
 921 OSPREY LANE

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 ROCKLEDGE, FL 32955

 Name:
 KING, JENNIFER
 Name:
 MULKEY, JOHN

 Address:
 1020 PELICAN LANE
 Address:
 939 OSPREY LANE

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 ROCKLEDGE, FL 32955

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: JENNIFER KING TD 04/30/2007