

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37137

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: PH HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

1978 ROCKLEDGE BLVD  
SUITE 106  
ROCKLEDGE, FL 32955 US

## New Principal Place of Business:

## Current Mailing Address:

1978 ROCKLEDGE BLVD.  
SUITE 106  
ROCKLEDGE, FL 32955 US

## New Mailing Address:

FEI Number: 59-3168265      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADVANCED PROPERTY MANAGEMENT  
1978 ROCKLEDGE BLVD  
SUITE 106  
ROCKLEDGE, FL 32955 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: VD ( ) Delete  
Name: REEVES, JOE  
Address: 916 PELICAN LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD ( ) Delete  
Name: KING, JENNIFER  
Address: 1020 PELICAN LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: DASKI, DUANE  
Address: 1045 PELICAN LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD (X) Delete  
Name: KAMINSKI, RICHARD  
Address: 921 OSPREY LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: PD ( ) Delete  
Name: MULKEY, JOHN  
Address: 939 OSPREY LANE  
City-St-Zip: ROCKLEDGE, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition  
Name: REEVES, JOE  
Address: 916 PELICAN LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD (X) Change ( ) Addition  
Name: JENKINS, ROBERT  
Address: 1020 KINGFISHER WAY  
City-St-Zip: ROCKLEDGE, FL 32955

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

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: VAN C. MOORE

RA

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date