2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38128

FILED Mar 19, 2008 Secretary of State

Entity Name: HOWELL CREEK PARK HOMEOWNERS' ASSOCIATION, INC.

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

3756 ALDERGATE PL

CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

3756 ALDERGATE PL

CASSELBERRY, FL 32707 US

FEI Number: 59-3009238 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:

SCHREIBER, LORI A SCHREIBER, LORI A SEC 3756 ALDERGATE PL 3756 ALDERGATE PL

CASSELBERRY, FL 327076300 US CASSELBERRY, FL 327076300 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: LORI A SCHREIBER 03/19/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: STAMER, MATTHEW PRES
Address: 3749 ALDERGATE PL Address: 3749 ALDERGATE PL
City-St-Zip: CASSELBERRY, FL 32707 US Casselberry, FL 32707 US

Title: DST () Delete Title: (X) Change () Addition SCHREIBER, LORI A Name: SCHREIBER, LORI A SEC/TRE Name: Address: 3756 ALDERGATE PL Address: 3756 ALDERGATE PL City-St-Zip: CASSELBERRY, FL 32707 US City-St-Zip: CASSELBERRY, FL 32707 US

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

 Name:
 STAMER, MELISSA
 Name:
 STAMER, MELISSA VP

 Address:
 3749 ALDERGATE PL
 Address:
 3749 ALDERGATE PL

 City-St-Zip:
 CASSELBERRY, FL 32707
 City-St-Zip:
 CASSELBERRY, FL 32707

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: LORI A SCHREIBER SEC 03/19/2008