2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N38128

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

Current Principal Place of Business:

3756 ALDERGATE PL
CASSELBERRY, FL 32707 US

New Principal Place of Business:

3701 ALDERGATE PL
CASSELBERRY, FL 32707 US

Current Mailing Address:

3756 ALDERGATE PL
CASSELBERRY, FL 32707 US

New Mailing Address:

3701 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:

SCHREIBER, LORI A SEC
3756 ALDERGATE PL
CASSELBERRY, FL 327076300 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: PD ( ) Delete
Name: STAMER, MATTHEW PRES
Address: 3749 ALDERGATE PL
City-St-Zip: CASSELBERRY, FL 32707 US

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

Title: VD ( ) Delete
Name: STAMER, MELISSA VP
Address: 3749 ALDERGATE PL
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JOHNSON, LOUIS R PRES
Address: 3701 ALDERGATE PL
City-St-Zip: CASSELBERRY, FL 32707 US

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

Title: VD (X) Change ( ) Addition
Name: PRITZKER, TOBI VP
Address: 3728 ALDERGATE PL
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 DST 04/30/2009

Electronic Signature of Signing Officer or Director — Date