2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N40331

Entity Name: CONWAY PLACE HOMEOWNER'S ASSOCIATION OF ORANGE COUNTY, INC.

Current Principal Place of Business:

709 E. MICHIGAN ST.
ORLANDO, FL 32806 US

New Principal Place of Business:

Current Mailing Address:

POB 560698
ORLANDO, FL 32856 US

New Mailing Address:

PO BOX 560698
ORLANDO, FL 32856 US

FEI Number: 59-3133607 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL, TRACY L
709 E. MICHIGAN ST.
ORLANDO, FL 32806 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: MOORE, JOHN
Address: 4091 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: VPD ( ) Delete
Name: MCCLELLAN, PARKER
Address: 4223 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: SD ( ) Delete
Name: BORDENKIRCHER, JOHN DAVID
Address: 4163 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: TD ( ) Delete
Name: LANT, DEBBIE
Address: 4128 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: D ( ) Delete
Name: JOHNSON, CHRIS
Address: 4254 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: D ( ) Delete
Name: ROBERTS, BONNIE
Address: 4182 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MCCLELLAN, PARKER
Address: 4223 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: VPD (X) Change ( ) Addition
Name: AMBROSE, KARL
Address: 4115 CONWAY PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

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

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

Title: D (X) Change ( ) Addition
Name: LANE, KELLY
Address: 4010 PECAN LANE
City-St-Zip: ORLANDO, FL 32812

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: PARKER MCCLELLAN PD 04/24/2009

Electronic Signature of Signing Officer or Director — Date