2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008
Secretary of State

DOCUMENT# N93000000990

Entity Name: BENJAMIN'S RUN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1813 WAGON WHEEL CIRCLE EAST
TALLAHSSEE, FL 323175374

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15374
TALLAHSSEE, FL 323175374

New Mailing Address:

FEI Number: 59-3166675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GASTON, ALEXIS C
1813 WAGON WHEEL CIRCLE EAST
TALLAHASSEE, FL 32317 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: P ( ) Delete
Name: GASTON, ALEXIS
Address: 1813 WAGON WHEEL CIR E
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP ( ) Delete
Name: BURT, TOM
Address: 5602 LONG KNIFE COURT
City-St-Zip: TALLAHASSEE, FL 32317

Title: TRSR ( ) Delete
Name: THOMPSON, WILLIAM J
Address: 5610 LONGKNIFE COURT
City-St-Zip: TALLAHASSEE, FL 32317

Title: SEC (X) Delete
Name: MAXWELL, CHRIS
Address: 5608 MAIZE COURT
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ALEXIS C. GASTON P 01/28/2008

Electronic Signature of Signing Officer or Director — Date