2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# N96000005994

Entity Name: MYRTLE POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

PO BOX 1418
PALM HARBOR, FL 34682

New Mailing Address:

3527 PALM HARBOR BLVD.
PALM HARBOR, FL 34683

FEI Number: 59-3415572 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANSON, JACK B
MELROSE MANAGEMENT GROUP
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

HANSON, JACK B
MELROSE-SOVEREIGN COMPANIES
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 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: JACK B HANSON 04/24/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RAYMOND, MICHAEL
Address: 3902 MORENO DRIVE
City-St-Zip: PALM HARBOR, FL 34685 US

Title: VPD ( ) Delete
Name: SMART, HAROLD
Address: 5441 MILLBROOK WAY
City-St-Zip: PALM HARBOR, FL 34685

Title: SD ( ) Delete
Name: SANCHEZ, TED
Address: 3879 MORENO DRIVE
City-St-Zip: PALM HARBOR, FL 34685

Title: TD ( ) Delete
Name: SALEM, BOB
Address: 5289 MIRA VISTA DR
City-St-Zip: PALM HARBOR, FL 34685

Title: D ( ) Delete
Name: SCHULMAN, ERIC
Address: 3996 MIMOSA PLACE
City-St-Zip: PALM HARBOR, FL 34685

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:

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: MICHAEL RAYMOND P 04/24/2008
Electronic Signature of Signing Officer or Director — Date