

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90002 003 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                 |                                                                                                                     |                                                                                                                                      |                                                                                                    |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # N97000000343</b><br>1. Entity Name<br><b>ALDEN PINES HOME OWNERS ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                 |                                                                                                                     |                                                                                                                                      |                   |  |
| Principal Place of Business<br><b>PO BOX 244</b><br><b>BOKEELIA, FL 33922 US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                 |                                                                                                                     | Mailing Address<br><b>PO BOX 244</b><br><b>BOKEELIA, FL 33922 US</b>                                                                 |                                                                                                    |  |
| 2. Principal Place of Business - No P.O. Box #<br><b>14221 CLUBHOUSE DR</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                 | 3. Mailing Address<br>Suite, Apt. #, etc.                                                                           |                                                                                                                                      |                                                                                                    |  |
| City & State<br><b>BOKEELIA, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                 | City & State<br><b>Land</b>                                                                                         |                                                                                                                                      |                                                                                                    |  |
| Zip<br><b>33922</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country<br><b>USA</b>                                                                           | Zip                                                                                                                 | Country                                                                                                                              | 4. FEI Number<br><b>65-0655358</b>                                                                 |  |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                 |                                                                                                                     |                                                                                                                                      | Applied For<br><input type="checkbox"/> Not Applicable                                             |  |
| 6. Name and Address of Current Registered Agent<br><b>DAVIS, BILL</b><br><b>14221 CLUBHOUSE DRIVE</b><br><b>BOKEELIA, FL 33922</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                 |                                                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |                                                                                                    |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                 |                                                                                                                     |                                                                                                                                      |                                                                                                    |  |
| SIGNATURE <u><i>Bill Davis</i></u><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                 |                                                                                                                     |                                                                                                                                      |                                                                                                    |  |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                                                                      | <b>Make check payable to Florida Department of State</b>                                           |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                 |                                                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                         |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>WERNER, DAVE</b><br><b>14043 BOKEELIA RD</b><br><b>BOKEELIA, FL 33922</b>        | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <b>DIRECTOR</b><br><b>LAURA NELSON</b><br><b>7741 GRANDE PINE RD</b><br><b>BOKEELIA, FL 33922</b>  |  |
| <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                 |                                                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>P</b><br><b>DAVIS, BILL</b><br><b>14221 CLUBHOUSE DR</b><br><b>BOKEELIA, FL 33922</b>        | <input type="checkbox"/> Delete                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>GENTRY, DICK</b><br><b>14318 CLUBHOUSE DRIVE</b><br><b>BOKEELIA, FL 33922</b>    | <input type="checkbox"/> Delete                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>D</b><br><b>NAVIA, MAX</b><br><b>7747 GRANDE PINE RD</b><br><b>BOKEELIA, FL 33922</b>        | <input type="checkbox"/> Delete                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>DS</b><br><b>SANDERS, MITZI</b><br><b>14271 SANDA RAC DRIVE</b><br><b>BOKEELIA, FL 33922</b> | <input type="checkbox"/> Delete                                                                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                    |                                                                                                    |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>T</b><br><b>FUNDACK, DAWN</b><br><b>14374 TAMARAC DRIVE</b><br><b>BOKEELIA, FL 33922</b>     | <input checked="" type="checkbox"/> Delete                                                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <b>TREASURER</b><br><b>MARY NAVIA</b><br><b>7747 GRANDE PINE ROAD</b><br><b>BOKEELIA, FL 33922</b> |  |
| <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                 |                                                                                                                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition                                                         |                                                                                                    |  |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                 |                                                                                                                     |                                                                                                                                      |                                                                                                    |  |
| SIGNATURE: <u><i>William Davis</i></u> <b>BILL DAVIS</b> <span style="float: right;"><u><i>2392825778</i></u></span><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                 |                                                                                                                     |                                                                                                                                      |                                                                                                    |  |