2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State
02-25-2008 90048 015 ****61.25

DOCUMENT # N97000005022

1. Entity Name
ADRIAN WOODS HOMEOWNERS' ASSOCIATION, INC.

40031212

Principal Place of Business	Mailing Address
5704 FARREL WAY MILTON, FL 32583 US	P O BOX 732 MILTON, FL 32572 US

02192008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1012 Ashley Road	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Milton, FL	City & State
Zip: 32583 Country: USA	Zip Country

4. FEI Number: 59-3503910 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PERROTTA, AMELIA M 5704 FARREL WAY MILTON, FL 32583	Name: Robert McMaster Street Address (P.O. Box Number is Not Acceptable): 1012 Ashley Road City: Milton FL Zip Code: 32583

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: Robert A McMaster Robert McMaster, President/Director 2/19/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PERROTTA, AMELIA M 5704 FARREL WAY MILTON, FL 32583	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D P Robert McMaster 1012 Ashley Road Milton, FL 32583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FIGOLAH, JAMES R 1026 RIN COURT MILTON, FL 32583	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VP Dennis E. Burt 1136 Adrian Way Milton, FL 32583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ABSHIRE, LEONARD J JR. 1043 ADRIAN WAY MILTON, FL 32583	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D S Donald Hamilton 1023 Ashley Road Milton, FL 32583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITFIELD, CHRISTINE 1000 ASHLEY RD MILTON, FL 32583	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D T Denise DeAngelo 1001 Ashley Road Milton, FL 32583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sarah Rivera 1052 Aden Court Milton, FL 32583	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Robert McMaster, President Robert A. McMaster 2/19/2008 850-217-0115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #