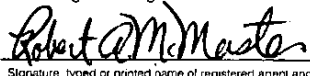
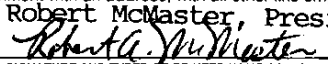


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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.					
Principal Place of Business 5704 FARREL WAY MILTON, FL 32583 US			Mailing Address P O BOX 732 MILTON, FL 32572 US		
2. Principal Place of Business - No P.O. Box # 1012 Ashley Road		3. Mailing Address Suite, Apt. #, etc.			
City & State Milton, FL		City & State			
Zip 32583	Country USA	Zip	Country	4. FEI Number 59-3503910	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent PERROTTA, AMELIA M 5704 FARREL WAY MILTON, FL 32583				7. Name and Address of New Registered Agent 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 McMaster, President/Director 2/19/08 (NOTE: Registered Agent signature required when reinstating)			
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	D Sarah Rivera 1052 Aden Court Milton, FL 32583	☐ 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	D 	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D
		☐ 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		2/19/2008 850-217-0115	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

40031212



02192008 Chg-NP CR2E037 (12/06)