2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N98000002933

Entity Name: THE HORSESHOE CANAL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2205 CORAL DR
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

2205 CORAL DR
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 59-3505459 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GELLER, RUDOLPH S
2205 CORAL DR
LYNN HAVEN, FL 32444 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: GELLER, RUDOLPH S
Address: 2205 CORAL AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: V ( ) Delete
Name: CLARK, JOHN
Address: 2207 WINDJAMMER DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: S ( ) Delete
Name: GELLER, KATHY
Address: 2205 CORAL DR
City-St-Zip: LYNN HAVEN, FL 32444

Title: T ( ) Delete
Name: WEBER, SANDRA R
Address: 2005 CORAL DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition
Name: ALLEN, LARRY
Address: 2107 WINDJAMMER DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

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: RUDOLPH S GELLER P 04/29/2008
Electronic Signature of Signing Officer or Director — Date