

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jun 12, 2007**  
**Secretary of State**

DOCUMENT# N98000005020

**Entity Name:** SOUTHCHASE PHASE 1A PARCELS 12, 14 AND 15 HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**PMB 345  
4250 ALAFAYA TRAIL SUITE 212  
OVIEDO, FL 32765 US**New Principal Place of Business:**13864 TIMBERBROOKE DRIVE  
UNIT 101  
ORLANDO, FL 32824 US**Current Mailing Address:**PMB 345  
4250 ALAFAYA TRAIL SUITE 212  
OVIEDO, FL 32765 US**New Mailing Address:**P O BOX 770446  
ORLANDO, FL 328240446 US**FEI Number:** 59-3578380**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RELIABLE PROPERTY MANAGERS INC  
4250 ALAFAYA TRAIL  
SUITE 212-345  
OVIEDO, FL 32765 US**Name and Address of New Registered Agent:**NE AN SERVICES, INC.  
13864 TIMBERBROOKE DR.  
UNIT 101  
ORLANDO, FL 32824 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: NEIL J BAILEY

06/12/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SILVA, DAVID  
Address: 1227 KEMPTON CHASE PKWY  
City-St-Zip: ORLANDO, FL 32837 US

Title: VP ( ) Delete  
Name: PEREZ, ORLANDO  
Address: 1224 KEMPTON CHASE PKWY  
City-St-Zip: ORLANDO, FL 32837 US

Title: ST ( ) Delete  
Name: MCELHENNEY, JAMES  
Address: 1320 EPSON OAKS WY  
City-St-Zip: ORLANDO, FL 32837 US

**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:

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: DAVID SILVA

P

06/12/2007

Electronic Signature of Signing Officer or Director

Date