2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001913

FILED Apr 10, 2008 Secretary of State

Entity Name: WESTCHESTER OF HILLSBOROUGH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11902 RACE TRACK ROAD TAMPA, FL 33626 **Current Mailing Address: New Mailing Address:** 11902 RACE TRACK ROAD TAMPA, FL 33626 FEI Number: 59-3568115 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PROPERTY GROUP OF CENTRAL FLORIDA 11902 RACE TRACK ROAD TAMPA, FL 33626 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete (X) Change () Addition BLAKE, DON BLAKE, DON Name: Name: 12021 EVANSHIRE CT. Address: 12021 EVANSHIRE CT. Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: DT Title: (X) Change () Addition () Delete BAIER, CHARLES Name: BAIER, CHARLES Name: Address: 12015 MOUNTBATTEN DR. Address: 12015 MOUNTBATTEN DR. City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: DS () Delete Title: () Change () Addition MELENDEZ, KIM Name: Name: 12214 COLDSTREAM LANE Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: (X) Change () Addition Title: DVP () Delete Title: DVP Name: SURBER, TONY Name: CLARK, MICHELLE 11414 CYPRESS RESERVE DR Address: Address: 11612 WINDSORTON WAY City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: (X) Delete Title: () Change () Addition FAINGOLD, ELLEN Name: Name: 12219 BISHOPSFORD DR Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: Title: (X) Delete Title: () Change () Addition CLARK, MICHELE Name: Name: Address: 11612 WINDSORTON WAY Address: **TAMPA, FL 33626** City-St-Zip: 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: CHARLES BAIER DP 04/10/2008