## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jul 31, 2008 8:00 am Secretary of State

| 1. Entity Nam  | MENT #752606<br>LEN VILLAS, INC.  |                           |  |  |   |  | 07-31-2008 9         | 90044 029 ****6   | 1.25   |
|--|---|---------------------------|--|--|---|--|----------------------|---|--|
| Principal Place of Business Mailing Address 16105 N. FLORIDA 16105 N. FLORIDA  |   |                           |  |  |   |  |                      |   |  |
| SUITE A SUITE A LUTZ, FL 33549   |   |                           |  |  | <br>  |  |                      |   |  |
| 2. Principal P   | Place of Business - No P.O. Box #   | 3. Mailing Address        |  |  |   |  |                      |   |  |
| Suite, Apt. #, etc.  |   | Suite, Apt. #. etc.       |  |  | 07142008  | Chg-NP   | CR2E037 (12/06       | )   |  |
| City & State   |   | City & State              |  |  |   | 4. FEI Numbe<br>59-3095                        |                      | <u> </u>  | Applied For<br>Not Applicable                      |
| Zip  | Country   | Zip                       | _  | Cou  | intry   | 5. Certificate                                 | of Status Desired    | □ \$8.75 A<br>Fee Requ  |  |
|  | 6. Name and Address of Current  | Registered A              | \gent  |  |   | 7. Name and                                    | Address of New I     | Registered Agent  |  |
| DAH EV CAM   |   |                           |  |  | Name  |  |                      |   |  |
| BAILEY, SAM 3405 ELLENWOOD LANE TAMPA, FL 33618  |   |                           |  |  | Street Address (P.O. Box Number is Not Acceptable)  |  |                      |   |  |
|  | 2 33010   |                           |  |  |   |  |                      |   |  |
|  |   |                           |  |  | City  | <del></del>                                    |                      | FL Zip C  | ode  |
|  | e named entity submits this statement fi<br>tions of registered agent.  | or the purpose            | of changing its                                      | register   | ed office or regi   | istered agent, or bot                          | n, in the State of F | lorida. I am familiar wi  | th, and accept                                     |
| SIGNATURE  |   |                           |  |  |   |  |                      |   |  |
|  | Signature, typed or printed name of registered agen   | t and little it appacat   | ole. (NOT  | E: Registere   | d Agent signature req   | quired when reinstating)                       |                      | DATE  |  |
| D  | Filing Fee is \$61.25<br>ue by September 12, 2008   | it and little it applicat | 9. Election Car<br>Trust Fund (                      | mpaign F   | inancing  | \$5.00 May Be Added to Fees                    | Flo                  | Make check payable orlda Department of  |  |
| D 10.  | Filing Fee is \$61.25<br>ue by September 12, 2008<br>OFFICERS AND D   |                           | 9. Election Car                                      | mpaign F   | inancing  | \$5.00 May Bo<br>Added to Fees                 | Flo                  | Make check payable  | State  |
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| 10.<br>TITLE<br>NAME   | Filing Fee is \$61.25<br>ue by September 12, 2008<br>OFFICERS AND D<br>PD<br>BAILEY, SAM  |                           | 9. Election Car<br>Trust Fund C                      | mpaign F<br>Contribut<br>11.<br>THU<br>NAM   | inancing ion.   E   | \$5.00 May Bo<br>Added to Fees                 | Flo                  | Make check payable or da Department of ERS AND DIRECTORS  | State<br>IN 10                                     |
| 10.  | Filing Fee is \$61.25<br>ue by September 12, 2008<br>OFFICERS AND D   |                           | 9. Election Car<br>Trust Fund C                      | mpaign F<br>Contribut<br>11.<br>TITU<br>NAM<br>STRE  | financing ion.  | \$5.00 May Bo<br>Added to Fees                 | Flo                  | Make check payable or da Department of ERS AND DIRECTORS  | State<br>IN 10                                     |
| 10. TITLE NAME STREET ADDRESS  | Filing Fee is \$61.25<br>ue by September 12, 2008<br>OFFICERS AND D<br>PD<br>BAILEY, SAM<br>3405 ELLENWOOD LANE   |                           | 9. Election Car<br>Trust Fund C                      | mpaign F<br>Contribut<br>11.<br>TITU<br>NAM<br>STRE  | inancing ion.   E E E -ST-ZIP   | \$5.00 May Bo<br>Added to Fees                 | Flo                  | Make check payable or da Department of ERS AND DIRECTORS  | State IN 10 e   Addition                           |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | Filing Fee is \$61.25 ue by September 12, 2008  OFFICERS AND D  PD BAILEY, SAM 3405 ELLENWOOD LANE TAMPA, FL 33618  VP BARBERY, O. HOWARD   |                           | 9. Election Car<br>Trust Fund C                      | mpaign F Contribut  11. THU NAM STRE CITY TITU NAM   | inancing ion.   E E E E ET ADDRESS -ST-ZIP E E  | \$5.00 May Bo<br>Added to Fees                 | Flo                  | Make check payable or ida Department of ERS AND DIRECTORS   | State IN 10 e                                      |
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12. I nereby 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 chapter 617, Florida Statutes and that my name appears in Block 10 or Block 11 if

SIGNATURE:

NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-18-08

Daytime Phone #