2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Feb 27, 2008 8:00 am Secretary of State **DOCUMENT # 753436** 1. Entity Name 02-27-2008 90015 035 \*\*\*\*70.00 COUNTRY CLUB ESTATES ASSOCIATION OF LEHIGH ACRES,INC. Principal Place of Business Mailing Address 1421 ARCHER ST P O BOX 25 LEHIGH ACRE FL 33972 LEHIGH ACRES FL 33970 33936 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-0899094 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARINO, ROBERT Street Address (P.O. Box Number is Not Acceptable) 1421 ARCHER ST LEHIGH ACRES FL 33972 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 . (NOTE: Berjistered Agent signature industed when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to, \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE ☐ Delete TITLE Change ☐ Addition MARINO, ROBERT NAME 1421 ARCHER ST STREET ADDRESS STREET ADDRESS LEHIGH ACRES FL 33972 CITY-ST-ZIP CITY-ST-ZIP 33936 TR TITLE ☐ Delete TITLE T Change ☐ Addition TREMBLAY, LOUISE NAME NAME 1621 COUNTRY CLUB PARKWAY STREET ADDRESS STREET ADDRESS LEHIGH ACRES FL 33972 CITY- ST-7IP CITY-ST-ZIP SDI THE ΞΪĹΈ KAREN MARINO, MARY NAME 1737 ENGLEWOOD AVE STREET ADDRESS 1421 ARCHER ST STREET ADDRESS LEHIGH ACRES FL 33972 CITY-ST-ZIP CITY-ST-ZIP LehighAcres FL 33936 VΡ TITLE Delete TITLE Change ☐ Addition FRANK Mc Cully Ave. KING, KENNETH NAME NAME 106 ORTONOA ST STREET ADDRESS STREET ADDRESS Lehigh ACRES FL 33936 CITY-ST-ZIP LEHIGH ACRES FL 33972 CITY-ST-ZIP TITLE Delete 1171.6 ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Datete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained in Section 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. 239

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CITY-SI-7IP

Marin - Robert-MARINO2-12-08 SIGNATURE: