

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 18, 2012**  
**Secretary of State**

DOCUMENT# 755414

**Entity Name:** EAST LAKE BUNGALOWS HOME OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**A & G MANAGEMENT  
11360 FORTUNE CIRCLE, SUITE E-6A  
WELLINGTON, FL 33414 US**New Principal Place of Business:**THE CONTINENTAL GROUP, INC.  
3461-B FAIRLAND FARMS ROAD  
WELLINGTON, FL 33414 US**Current Mailing Address:**A & G MANAGEMENT  
11360 FORTUNE CIRCLE, SUITE E-6A  
WELLINGTON, FL 33414 US**New Mailing Address:**THE CONTINENTAL GROUP, INC.  
3461-B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414 US**FEI Number:** 59-2073031**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**A & G MANAGEMENT  
11360 FORTUNE CIRCLE - SUITE E6A  
STE E6A  
WELLINGTON, FL 33414 US**Name and Address of New Registered Agent:**JAY STEVEN LEVINE, P.A.  
3300 PGA BOULEVARD  
STE 570  
PALM BEACH GARDENS, FL 33410 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: JAY STEVEN LEVINE, P.A.

09/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: STECKER, PATSY  
Address: 2140 WIGHTMAN DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: NEGRE, ADELINE  
Address: 2123 WIGHTMAN DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: ABRAMS, JILL  
Address: 2059 WIGHTMAN DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: DST  
Name: MILLER, WENDELL  
Address: 11683 WIMBLEDON CIRCLE  
City-St-Zip: WELLINGTON, FL 33414

Title: D  
Name: KROEGER, SUSAN  
Address: 2083 WIGHTMAN DRIVE  
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: PATSY STECKER

P

09/18/2012

Electronic Signature of Signing Officer or Director

Date