

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Apr 27, 2007  
Secretary of State**

DOCUMENT# 770372

**Entity Name:** EAGLE'S LANDING HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044**New Principal Place of Business:**21301 S TAMIAMI TRAIL  
SUITE 320 PMB 335  
ESTERO, FL 33928**Current Mailing Address:**2180 WEST STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044**New Mailing Address:**21301 S TAMIAMI TRAIL  
SUITE 320 PMB 335  
ESTERO, FL 33928

FEI Number: 59-2451866

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:**HAYDEN & ASSOCIATES  
21301 S TAMIAMI TRAIL  
SUITE 320 PMB 335  
ESTERO, FL 33928 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: KEN HAYDEN

04/27/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: TD ( ) Delete  
Name: HOVIOUS, DONALD  
Address: 16610 TIMBERLAKES DR #A  
City-St-Zip: FORT MYERS, FL 33908Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: PD ( ) Delete  
Name: FILAR, KENNETH  
Address: 16592 TIMBERLAKES DR #B  
City-St-Zip: FORT MYERS, FL 33908Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D ( ) Delete  
Name: MARRA, RONALD SR  
Address: 16584 TIMBERLAKES DR #B  
City-St-Zip: FORT MYERS, FL 33908Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: SD ( ) Delete  
Name: SMITHWICK, GARY  
Address: 16598 TIMBERLAKES DR #B  
City-St-Zip: FORT MYERS, FL 33908Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D ( ) Delete  
Name: REYNOLDS, MARY ANN  
Address: 16620 TIMBERLAKES DR #A  
City-St-Zip: FORT MYERS, FL 33908Title: ( ) 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: KEN HAYDEN

CAM

04/27/2007

Electronic Signature of Signing Officer or Director

Date