2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N00000002806

Entity Name: WATER OAK RESIDENT'S SOCIAL CLUB, INC.

Current Principal Place of Business:

106 EVERGREEN LN.
LADY LAKE, FL 32159

New Principal Place of Business:

Current Mailing Address:

106 EVERGREEN LN.
LADY LAKE, FL 32159

New Mailing Address:

FEI Number: 59-3651267 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SULLIVAN, SUSAN T ESQ
13469 N. US HWY 441
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: ELLER, GREGORY
Address: 801 STADLER STREET
City-St-Zip: LADY LAKE, FL 32159

Title: VPD ( ) Delete
Name: CAMPBELL, DAN
Address: 311 GRIMES DRIVE
City-St-Zip: LADY LAKE, FL 32159

Title: TD ( ) Delete
Name: LA NOCE, MARY
Address: 710 EAST NORMAN ST
City-St-Zip: LADY LAKE, FL 32159

Title: SD ( ) Delete
Name: COUEY, JOHNNIE
Address: 205 MAPLE DRIVE
City-St-Zip: LADY LAKE, FL 32159

Title: D (X) Delete
Name: DE FLIPPIS, ROSE
Address: 812 STADLER STREET
City-St-Zip: LADY LAKE, FL 32159

Title: D (X) Delete
Name: SHERRILL, SIGI
Address: 609 HOLLY CIRCLE
City-St-Zip: LADY LAKE, FL 32159

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: LE CLERE, MARIETTE
Address: 904 ZOELLER STREET
City-St-Zip: LADY LAKE, FL 32159

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGORY ELLER PD 05/01/2006

Electronic Signature of Signing Officer or Director — Date