## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000012276

**Current Principal Place of Business:** 

Name and Address of Current Registered Agent:

() Delete

8403 S. PARK CIRCLE, SUITE 670

() Delete

8403 S. PARK CIRCLE, SUITE 670

() Delete

8403 S. PARK CIRCLE, SUITE 670

8403 S. PARK CIRCLE

ORLANDO, FL 32819

ORLANDO, FL 32819 FEI Number: 20-4959937

**Current Mailing Address:** 8403 S. PARK CIRCLE

COOKSON, SCOTT A ESQ. 8403 S. PARK CIRCLE

ORLANDO, FL 32819 US

**OFFICERS AND DIRECTORS:** 

CALL, MATT

ORLANDO, FL 32819

COWHERD, BRAD

WANZECK, MATT

ORLANDO, FL 32819

ORLANDO, FL 32819

in the State of Florida.

SUITE 670

SUITE 670

SUITE 670

SIGNATURE:

Name: Address:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

City-St-Zip:

FILED Aug 07, 2006 Secretary of State

Certificate of Status Desired ( )

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

9102 SOUTHPARK CENTER LOOP, SUITE 200

(X) Change ( ) Addition

9102 SOUTHPARK CENTER LOOP, SUITE 200

(X) Change ( ) Addition

9102 SOUTHPARK CENTER LOOP, SUITE 200

**New Principal Place of Business:** 

Name and Address of New Registered Agent:

DOMAIN, JOHN

ORLANDO, FL 32819

COWHERD, BRAD

CAMP, JEREMY

ORLANDO, FL 32819

ORLANDO, FL 32819

8009 S. ORANGE AVENUE

8009 S. ORANGE AVENUE

ORLANDO, FL 32809

**New Mailing Address:** 

ORLANDO, FL 32809

FEI Number Not Applicable ( )

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Name:

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Address:

City-St-Zip:

Entity Name: THE PRESERVE AT EAGLE LAKE HOMEOWNERS ASSOCIATION, INC.

FEI Number Applied For ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Electronic Signature of Registered Agent

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: JOHN DOMAIN D 08/07/2006