

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 18, 2007  
Secretary of State**

DOCUMENT# N35693

**Entity Name:** TRACT 181 COMMERCIAL PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8009 S ORANGE AVENUE  
ORLANDO, FL 328096711 US

**New Principal Place of Business:**

**Current Mailing Address:**

8009 S ORANGE AVENUE  
SUITE 110  
ORLANDO, FL 328096711 US

**New Mailing Address:**

**FEI Number:** 59-3017105      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LELAND MANAGEMENT, INC.  
8009 S ORANGE AVENUE  
ORLANDO, FL 328096711 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: P ( ) Delete  
Name: LUND, JOHN  
Address: 5741 TOWN CENTER BLVD  
City-St-Zip: ORLANDO, FL 32837

Title: VP ( ) Delete  
Name: KLEPK, MIKE  
Address: 3400 HUNTERS CREEK BLVD  
City-St-Zip: ORLANDO, FL 32837

Title: ST ( ) Delete  
Name: RASNIC, JOHN  
Address: 14101 TOWN LOOP BLVD  
City-St-Zip: ORLANDO, FL 32837

**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:

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 LUND

P

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date