2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# N98000004785

Entity Name: LAKES LARGO'S HOME OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

5 DEL CERRO CAMINO
CRESTVIEW, FL 32539 US

New Principal Place of Business:

Current Mailing Address:

5 DEL CERRO CAMINO
CRESTVIEW, FL 32539 US

New Mailing Address:

FEI Number: 59-3381740 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WADE, CHARLES A ESQ.
14 DEL CERRO CAMINO
P.O. BOX 785 (MAILING)
CRESTVIEW, FL 32539 US

Name and Address of New Registered Agent:

WADE, CHARLES A ESQ.
14 DEL CERRO CAMINO
CRESTVIEW, FL 32539 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: _____ 04/23/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LYNCH, MARK R
Address: 5 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

Title: VP ( ) Delete
Name: JOHNSON, GARY
Address: 8 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

Title: ST ( ) Delete
Name: LYNCH, DONNA M
Address: 5 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

Title: D ( ) Delete
Name: TEAS, BOYCE REV.
Address: 12 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

Title: D ( ) Delete
Name: BERGSCHNEIDER, VONDELLE
Address: 10 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

Title: D (X) Delete
Name: JOHNSON, SALLY
Address: 8 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition
Name: LYNCH, MARK R
Address: 5 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

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

Title: O (X) Change ( ) Addition
Name: LYNCH, DONNA M
Address: 5 DEL CERRO CAMINO
City-St-Zip: CRESTVIEW, FL 32539 US

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 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: MARK LYNCH O 04/23/2007
Electronic Signature of Signing Officer or Director — Date