2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006
Secretary of State

DOCUMENT# N00000002069

Entity Name: LAKE BUTLER SOUND COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
STE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
STE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3701498 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 WEST SR 434 STE 5000
LONGWOOD, FL 327795044 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: LEIFERMAN, JIM
Address: 555 WINDERLEY PLACE, SUITE 420
City-St-Zip: MAITLAND, FL 32751

Title: VPD ( ) Delete
Name: PUVOGEL, DOUG
Address: 555 WINDERLEY PLACE SUITE 420
City-St-Zip: MAITLAND, FL

Title: STD ( ) Delete
Name: DUNCAN, JUDITH L
Address: 555 WINDERLEY PLACE, SUITE 420
City-St-Zip: MAITLAND, FL 32751

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BERK, JIM
Address: 6126 KIRKSTONE LN
City-St-Zip: WINDERMERE, FL 34786

Title: VPD (X) Change ( ) Addition
Name: KATZ, JOHNATHAN
Address: 6233 RYDAL CT
City-St-Zip: WINDERMERE, FL 34786

Title: STD (X) Change ( ) Addition
Name: DOBBS, KRISTINE
Address: 11150 BRIDGE HOUSE RD
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Change (X) Addition
Name: RIAL, JONES
Address: 833 N MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Change (X) Addition
Name: SAMUELS, JOSEPH
Address: 11044 HAWKSHEAD CT
City-St-Zip: WINDERMERE, FL 34786

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: JIM BERK PD 03/09/2006

Electronic Signature of Signing Officer or Director — Date