2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000012711

TI FILED

May 10, 2007

Secretary of State

Entity Name: LEE VISTA SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

101 SOUTHHALL LANE
SUITE 200
MAITLAND, FL 32751

8009 S. ORANGE AVE
ORLANDO, FL 32809 US

Current Mailing Address: New Mailing Address:

101 SOUTHHALL LANE 8009 S ORANGE AVE SUITE 200 ORLANDO, FL 32809 US MAITLAND, FL 32751

FEI Number: 55-0913135 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HACKER, BING

101 SOUTHHALL LANE

SUITE 200

MAITLAND, FL 32751 US

FURLOW, REBECCA

8009 S ORANGE AVE
ORLANDO, FL 32809 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: REBECCA FURLOW 05/10/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 DAVIS, HELEN
 Name:
 DAVIS, HELEN

 Address:
 101 SOUTHALL LN STE 400
 Address:
 101 SOUTHALL LN STE 400

City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751 US

Title: VP () Delete Title: VP (X) Change () Addition Name: STAFFA, DAVE Name: STAFFA, DAVE

Name: STAFFA, DAVE Name: STAFFA, DAVE
Address: 101 SOUTHALL LN STE 400 Address: 101 SOUTHALL LN

Address: 101 SOUTHALL LN STE 400 Address: 101 SOUTHALL LN STE 400 City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751 US

Title: TSD () Delete Title: S-T (X) Change () Addition Name: VALANTASIS, JOHN Name: VALANTASIS, JOHN

Address: 101 SOUTHALL LN STE 400 Address: 101 SOUTHALL LN STE 400
City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751 US

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: HELEN DAVIS P 05/10/2007