2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

1. Entity Nam	WNERS ASSOCIATION OF					y 01 Sta 51 037 ****61.2			
Principal Place of Business 9701 E HWY. 25 #282 BELLEVIEW, FL 34420 US		Mailing Address 9701 E HWY. 25 #282 BELLEVIEW, FL 34420 US			1 100 100 100 100 100 100 100 100 100 1	i 81118 (1811 88 11) 811 1) 1880 1881 1884 1884 1886 1		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02052008 C	hg-NP	CR2E037 (12/06))	
City & State		City & State			4. FEI Number 59-287800	03		Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of S	Status Desired	□ \$8.75 A Fee Requi		
	6. Name and Address of Current	Registered Agent			7. Name and Add	dress of New R	egistered Agent		
), DOLORES H				FURTONG, PETER L				
9701 E HV LOT #180			Su	pet Address	PO. Box Number is HWY 2	Not Acceptable) *** **		
	V, FL 34420		-	1 ct #62					
			Cit	Belleview FL Zip Code 34420					
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Peter J. Furlow PETER L FURLOWG) TREASURER 02/08/08									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent									
<u></u>						_			
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	entribution.	cing	\$5.00 May Be Added to Fees	Flori	ake check payable ida Department of	State	
10.	Due by May 1, 2008 OFFICERS AND DIE	Trust Fund Co	ntribution.	sing	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flori SES TO OFFICE	ida Department of	State IN 10	
10. TITLE NAME	Due by May 1, 2008	Trust Fund Co	entribution.	sing	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Flori SES TO OFFICE	ida Department of	State IN 10	
TITLE NAME STREET ADDRESS	OFFICERS AND DIE S LOIS, TENNEY 9701 E HWY 25 # 193	Trust Fund Co	11. TITLE NAME STREET ADD	v P	\$5.00 May Be Added to Fees ADDITIONS/CHANG	ESTO OFFICE	RS AND DIRECTORS Change	State IN 10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIE S LOIS, TENNEY 9701 E HWY 25 # 193 BELLEVIEW, FL 34420	Trust Fund Co	11. TITLE NAME STREET ADD CITY-ST-ZIE	RESS 97	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Charles - #	Ida Department of RS AND DIRECTORS A. Change CS. 4442 3442	State IN 10 Addition	
TITLE NAME STREET ADDRESS	OFFICERS AND DIE S LOIS, TENNEY 9701 E HWY 25 # 193	Trust Fund Co	11. TITLE NAME STREET ADD	RESS 97/3	\$5.00 May Be Added to Fees ADDITIONS/CHANG I PLURER, OI E HWY BELLEVIES URLONG, T	Floring SESTO OFFICE CHARLES - # CO. /-L	RS AND DIRECTORS RS AND DIRECTORS A. Change C. S. C. J. M. Change	State IN 10 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIE S LOIS, TENNEY 9701 E HWY 25 # 193 BELLEVIEW, FL 34420 T OSTRAND, DOLORES 9701 E HWY 25 #180 BELLEVIEW, FL 34420 P	Trust Fund Co	TITLE NAME STREET ADD CITY-ST-ZR TITLE NAME STREET ADD	RESS 97/3	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Floring SESTO OFFICE CHARLES - # CO. /-L	RS AND DIRECTORS RS AND DIRECTORS A. Change C. S. C. J. M. Change	State IN 10 Addition Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIE S LOIS, TENNEY 9701 E HWY 25 # 193 BELLEVIEW, FL 34420 T OSTRAND, DOLORES 9701 E HWY 25 #180 BELLEVIEW, FL 34420 P	Trust Fund Co	TITLE NAME STREET ADD CITY-ST-ZIF TITLE NAME STREET ADD CITY-ST-ZIF TITLE TITLE TITLE TITLE TITLE	RESS 977	\$5.00 May Be Added to Fees ADDITIONS/CHANG I PLURER, OI E HWY BELLEVIES URLONG, T	Floring SESTO OFFICE CHARLES - # CO. /-L	Ida Department of RS AND DIRECTORS A Change C.S. A 442 C. BA Change C.J.	State IN 10 Addition Addition	
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12. The etyl certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Peters & July	PETER L. FURLONG	02/08/08	352-307-1333
SIGNATURE AND TYPED OR PRINTED NAME OF	SKINING OFFICER OR DIRECTOR	Date	Daytime Phone #
			