2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34845

FILED Feb 27, 2009 Secretary of State

Entity Name: COLONIAL LAKES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4962 N. PALM AVE WINTER PARK, FL 32792 US **Current Mailing Address: New Mailing Address:** P.O. BOX 677307 ORLANDO, FL 32867 US FEI Number: 59-3140946 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: FRASCA, JOSEPH C/O PREFERRED COMMUNITY MANAGEMENT 4962 N. PALM AVE WINTER PARK, FL 327929111 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete VPD (X) Change () Addition HERNANDEZ, AMY HERNANDEZ, ANA Name: Name: 1531 BROOKEBRIDGE DR Address: 1405 BROOKEBRIDGE DR Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL Title: PD Title: (X) Change () Addition () Delete AVILES, WILLY Name: KUZMANOVIC, DUSAN Name: Address: 1523 BROOKBRIDGE DR Address: 1338 BROOKBRIDGE DR City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: SD (X) Change () Addition KYZMANOVIĆ, DUSAN MELENDEZ, ROSIE Name: Name: 1338 BROOKE BRIDGE DR 9458 DEARMONT AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: VPD () Change (X) Addition Name: Name: HANKELE, RAYMOND Address: Address: 9366 DEARMONT AVENUE City-St-Zip: City-St-Zip: OLRANDO, FL 32825 Title: () Delete Title: () Change (X) Addition RODRIGUEZ, ALBERTO Name: Name: 1310 BROOKEBRIDGE DRIVE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: () Change (X) Addition HERNANDEZ, YVETTE Name: Name: Address: Address: 1404 BROOKEBRIDGE DR ORLANDO, FL 32825 City-St-Zip: 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: JOSEPH FRASCA MGR 02/27/2009