2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 344793

FILED Mar 08, 2007 Secretary of State

Entity Name: LAKE EASY LAKEVIEW APARTMENTS INCORPORATED

Current Principal Place of Business: New Principal Place of Business: C/O KENYON HICKS C/O JAMES D. HOYMAN 1802 S. HIGHLAND PARK DR. 1800 S. HIGHLAND PARK DR LAKE WALES, FL 33898 LAKE WALES, FL 33898 US **Current Mailing Address:** New Mailing Address: 23 SERPENTINE DR 546A WINANS PLACE US ATLANTIC HIGHLANDS, NJ 07716 WEST POINT, NY 10996 US FEI Number: 65-1093803 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HICKS, KENYON I HOYMAN, JAMES D 1802 S. HIGHLAND PARK DR. 1800 S. HIGHLAND PARK DR. LAKE WALES, FL 34235 LAKE WALES, FL 34235 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: JAMES D HOYMAN 03/08/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: VP/T () Delete Title: (X) Change () Addition HICKS, STEPHEN J Name: Name: HOYMAN, LESLEY K 12114 HARBOR DR 546A WINANS PLACE Address: Address: WOODBRIDGE, VA 22192 City-St-Zip: City-St-Zip: WEST POINT, NY 10996 P/S Title: Title: () Delete (X) Change () Addition HOYMAN, JAMES D Name: HICKS, KENYON I JR Name: 23 SERPENTINE DR. 546A WINANS PLACE Address: Address: ATLANTIC HIGHLANDS, NJ 07716 WEST POINT, NY 10996 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ROGERS, MARGARET J Name: Name: 1005 CLARK AVENUE Address Address: City-St-Zip: MOUNTAINVIEW, CA 94040 City-St-Zip: Title: () Delete Title: () Change (X) Addition WEAVER, ERIC R Name: Name: Address: Address: 1724 S HIGHLAND PARK DR. City-St-Zip: City-St-Zip: LAKE WALES, FL 33898 Title: Title: () Change (X) Addition () Delete CUTLER, WYATT Name: Name: Address: Address: 565B CONNOR LOOP City-St-Zip: City-St-Zip: WEST POINT, NY 10996

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES D HOYMAN P 03/08/2007