2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700060

FILED Apr 30, 2007 Secretary of State

Entity Name: DAETWYLER SHORES ASSOCIATION INC

Current Principal Place of Business: New Principal Place of Business: 3013 TRENTWOOD BLVD. BELLE ISLE, FL 32812 **Current Mailing Address: New Mailing Address:** 3401 TRENTWOOD BLVD BELL ISLE, FL 328124850 US FEI Number: 59-2418786 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: LINCOLN, BRUCE 3013 TRÉNTWOOD BLVD. BELLE ISLE, FL 32812 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 () Change () Addition STARCEVICH, ROD Name: Name: 3113 TRENTWOOD BLVD. Address: Address: City-St-Zip: BELLE ISLE, FL 32812 US City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition OTTERBACHER, KATHY Name: SENN, MIKE Name: Address: 2822 TRENTWOOD BLVD Address: 3110 FLOWERTREE ROAD City-St-Zip: BELLE ISLE, FL 32812 US City-St-Zip: BELLE ISLE, FL 32812 US Title: Title: () Change () Addition () Delete LAND, DELLA Name: Name: 3306 TRENTWOOD BLVD Address: Address: City-St-Zip: BELLE ISLE, FL 32812 US City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition Name: SENN, MIKE Name: SCHMIDT, MIKE 3110 FLOWERTREE ROAD 2900 TRENTWOOD BLVD Address: Address: City-St-Zip: BELLE ISLE, FL 32812 US City-St-Zip: BELLE ISLE, FL 32812 US Title: () Delete Title: () Change () Addition LANCE, BOBBY Name: Name: 3401 TRENTWOOD BLVD. Address: Address: City-St-Zip: BELLE ISLE, FL 32812 US City-St-Zip: Title: () Delete Title: (X) Change () Addition NIEMINEN. LEE STUDER, CAROL Name: Name: Address: 3007 TRENTWOOD BLVD Address: 2914 TRENTWOOD BLVD BELLE ISLE, FL 32812 US BELLE ISLE, FL 32812 US 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: BOBBY LANCE TD 04/30/2007