2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007
Secretary of State

DOCUMENT# 710579

Entity Name: LAKE COUNTY EDUCATION ASSOCIATION, INC.,

Current Principal Place of Business:

1707 SOUTH ST.
N/A
LEESBURG, FL 34748 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 490816
N/A
LEESBURG, FL 347490816 US

New Mailing Address:

FEI Number: 59-0182681 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURTNETT, PAMELA A P
1707 SOUTH STREET
N/A
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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:

Title: T ( ) Delete
Name: WEST, KAREN A T
Address: P.O. BOX 784
City-St-Zip: LEESBURG, FL 34749 US

Title: S ( ) Delete
Name: STROW, KIM S
Address: P.O. BOX 151
City-St-Zip: HOWEY, FL 34737 US

Title: V ( ) Delete
Name: GRASSEL, BELITA V
Address: 14322 LAKE JUNIETTA DRIVE
City-St-Zip: EUSTIS, FL 32726 US

Title: P ( ) Delete
Name: BURTNETT, PAMELA A P
Address: 741 8TH AVENUE
City-St-Zip: MOUNT DORA, FL 32757 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T ( ) Change (X) Addition
Name: REVELS, DIANE C T
Address: 306 E. WASHINGTON STREET
City-St-Zip: MINNEOLA, FL 34715

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

SIGNATURE: PAM BURTNETT, PRESIDENT P 01/17/2007

Electronic Signature of Signing Officer or Director — Date