2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#722370

FILED Apr 28, 2007 Secretary of State

Entity Name: GEORGE'S LAKE HOME AND PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

114 SARASOTA STREET FLORAHOME, FL 32140 US

Current Mailing Address: New Mailing Address:

PO BOX 237

FLORAHOME, FL 321400237 US

FEI Number: 59-2556359 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:

COOPER, DOROTHY A
P.O. BOX 306

COOPER, DOROTHY A
368 TINSLEY ROAD

FLORAHOME, FL 32140 US FLORAHOME, FL 32140 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: DOROTHY COOPER 04/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PDD () Delete Title: P (X) Change () Addition

 Name:
 CASTLEBERRY, RAY
 Name:
 STARLING, KENNETH

 Address:
 839 HILLSBOROUGH AVENUE
 Address:
 P.O. BOX 486

 City-St-Zip:
 FLORAHOME, FL 32140
 City-St-Zip:
 FLORAHOME, FL 32140

 $\label{eq:title: VPD () Delete Title: V (X) Change () Addition} \end{minipage}$

 Name:
 CHITTY, BILL
 Name:
 ARNETT, SANDY

 Address:
 119 POCAHONTAS RD.
 Address:
 515 HILLSBOROUGH AVE.

 City-St-Zip:
 FLORAHOME, FL 32140
 City-St-Zip:
 FLORAHOME, FL 32140

Title: TD () Delete Title: T (X) Change () Addition

 Name:
 CHITTY, EDWINA
 Name:
 COOPER, DOROTHY

 Address:
 119 POCAHONTAS RD.
 Address:
 P.O. BOX 306

City-St-Zip: FLORAHOME, FL 32140 City-St-Zip: FLORAHOME, FL 32140

Title: SD () Delete Title: S (X) Change () Addition

Name:COOPER, DOROTHY AName:COOPER, DOROTHY AAddress:P.O. BOX 306Address:P.O. BOX 306

City-St-Zip: FLORAHOME, FL 32140 City-St-Zip: FLORAHOME, FL 32140

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: DOROTHY COOPER S 04/28/2007