2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: ×

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 05, 2007 8:00 am Secretary of State

DOCUMENT #724974 1. Entity Name LAUREL OAK VILLAGE UNIT FIVE PROPERTY OWNER'S ASSOCIATION, INC.						0:	2-05-2007 !	90106 029 ***	*61.25
Principal Place of Business Mailing Address 150 S. MAIN ST. P.O. BOX 1526 SUITE 1 LABELLE, FL 33935					1				
2. Principal Place of Business - No P.O. Box # 3. M			. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01092007 Cr	ng-NP	CR2E037 (12/06	i)
City & State			City & State			4. FEI Number 65-002964	5	}- }	Applied For Not Applicable
Zip	D Country		Zip Co		intry	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registe						7. Name and Address of New Registered Agent			
HIGGINBOTHAM, ANDREW J 150 S. MAIN STREET #1					Name Street Address (P.O. Box Number is Not Acceptable)				
LABELLE, FL 33975									
			City					FL Zip C	ode
	named entity submits this statement items of registered agent. Signature, typed or printed name of registered age					istered agent, or both, in	the State of Flo	rida. I am familiar wi	th, and accept
Filing Fee Is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		ake check payable da Department of	
10.	OFFICERS AND [PIRECTORS	3	11.		ADDITIONS/CHANGE	ES TO OFFICER	RS AND DIRECTORS	IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEALEY, JAMES 4556 SPRINGVIEW CIR LABELLE, FL 33935		☐ Delete					☐ Chang	e
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DANIELS, RANDY B 4504 SPRINGVIEW CIR LABELLE, FL 33935		☐ Delete					<u></u> Сћалд	e 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP YOUNG, TERRE 4506 FIRE CT LABELLE, FL 33935		□ Delete					☐ Chang	e 📋 Addition
TITLE NAME STREET ADDRESS CFTY-ST-ZIP	P PAYNTER, PHILIP 4510 SPRINGVIEW CIR LABELLE, FL 33935	_	□ Defete		ſ			☐ Chang	e 🗌 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, JOHN PO BOX 1441 LABELLE, FL 33975		□ Delete		ľ			☐ Chang	e
TITLE NAME STREET ADDRESS CHTY-ST-ZIP	S TALADA, RICHARD 4552 SPRINGVIEW CIR LABELLE, FL 33935		☐ Delete					☐ Chang	e
indicated of the cor	certify that the information supplied w l on this report or supplemental report poration or the receiver or trustee em , or on an attachment with an address	is true and powered to	accurate and that in execute this report	my signa Las requi	ture shall have t	the same legal effect as i	f made under o	ath; that I am an offic	cer or director