2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#757180

FILED Apr 30, 2007 Secretary of State

Entity Name: LAKE VILLAS Q AND R HOMEOWNERS ASSOCIATION, INC.

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

231 E. RUBY AVENUE 231 RUBY AVENUE

SUITE A SUITE A

KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 US

Current Mailing Address: New Mailing Address:

P.O. BOX 452847 231 RUBY AVENUE

KISSIMMEE, FL 347452847 SUITE A

KISSIMMEE, FL 34741

FEI Number: 59-2187636 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:

ASSOCIATION SOLUTIONS OF CENTRAL FLORIDA

231 E. RUBY AVE.

SUITE A

KISSIMMEE, FL 34741 US

ASSOCIATION SOLUTIONS OF CENTRAL FLORIDA

231 RUBY AVE.

SUITE A

KISSIMMEE, FL 34741 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: 04/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GUADAGNO, LEE
 Name:
 HOLMES, VIVIAN

 Address:
 38 LAKE VILLA WAY
 Address:
 23 LAKE VILLA WAY

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:
 KISSIMMEE, FL 34743

Title: PD () Delete Title: () Change () Addition

 Name:
 O'BRIEN, PATRICK
 Name:

 Address:
 54 LAKE VILLA WAY
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:

Title: VTD () Delete Title: () Change () Addition

 Name:
 ROSADO, RONALD
 Name:

 Address:
 109 LAKE VILLA WAY
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34743
 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: PATRICK O'BRIEN P 04/30/2007