2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760400

FILED Apr 30, 2007 Secretary of State

Entity Name: WEST CROOKED LAKE PLACE ASSOCIATION, INC.

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

1219 W CROOKED LAKE PL 1204 W CROOKED LAKE PL EUSTIS, FL 32726 US EUSTIS, FL 32726 US

Current Mailing Address: New Mailing Address:

1219 W CROOKED LAKE PL 1204 W CROOKED LAKE PL EUSTIS, FL 32726 US EUSTIS, FL 32726 US

FEI Number: 59-2207152 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:

HAMLIN, BARBARA MRS

1219 W. CROOKED LAKE PLACE
EUSTIS, FL 32726 US

PECK, DOTTY
1204 W. CROOKED LAKE PLACE
EUSTIS, FL 32726 US

EUSTIS, FL 32726 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: DOTTY PECK 04/30/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: MOTL, ROBERT Name: NELAN, JILL

Name: NELAN, JILL

Address: 1220 W CROOKED LAKE PL. Address: 1217 W CROOKED LAKE PL.

City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32726

Title: ST () Delete Title: ST (X) Change () Addition

Name: HAMLIN, BARBARA MRS Name: PECK, DOTTY

Address: 1219 W CROOKED LAKE PLACE Address: 1204 W CROOKED LAKE PLACE

City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32726

Title: V () Delete Title: () Change () Addition

 Name:
 STRASSHEIM, AGNES
 Name:

 Address:
 1218 W CROOKED LAKE PL.
 Address:

 City-St-Zip:
 EUSTIS, FL 32726
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 BATTIN, RUSSELL
 Name:

 Address:
 1210 W CROOKED LAKE PL
 Address:

 City-St-Zip:
 EUSTIS, FL 32726
 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: DOTTY PECK ST 04/30/2007