


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90098 042 ****61.25

DOCUMENT # 760969	
1. Entity Name LAKE MARIANA ACRES HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 2322 MARTHA DR. WINTER HAVEN, FL 33881	Mailing Address 2322 MARTHA DR. WINTER HAVEN, FL 33881
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2. Principal Place of Business - No P.O. Box # 1984 Thelma Drive Suite, Apt. #, etc.	3. Mailing Address 1984 Thelma Drive Suite, Apt. #, etc.
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City & State Lake Alfred Florida	City & State Lake Alfred Florida
Zip 33850	Zip 33850
Country Polk	Country Polk

01032007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2241043	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LOSER, GARY G 2322 MARTHA DR. WINTER HAVEN, FL 33881	7. Name and Address of New Registered Agent Name Diane D. Craig Street Address (P.O. Box Number is Not Acceptable) 1984 Thelma Drive Lake Alfred City FL Zip Code 33850
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Diane D. Craig* (NOTE: Registered Agent signature required when reinstating) DATE *January 16, 2007*

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERRILL, RON 1978 THELMA DR. WINTER HAVEN, FL 33881 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JoAnne Stockerl - Stockerl, Joanne 1957 Regina Drive Lake Alfred, Florida 33850 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORMICA, PAUL 1817 PAULINE DR. WINTER HAVEN, FL 33881 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Betsy Esley - Esley, Betsy 2142 Lois Blvd. Lake Alfred, Florida 33850 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILLER, BOB 2161 LOIS BLVD WINTER HAVEN, FL 33881 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOSER, GARY G 2322 MARTHA DR. WINTER HAVEN, FL 33881 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Diane Craig - Craig, Diane 1984 Thelma Drive Lake Alfred, Florida 33850 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP CHANCEY, JOHN 2030 THELMA DR. WINTER HAVEN, FL 33881 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Don Harenberg - Harenberg, Don 2136 Lois Blvd. Lake Alfred, Florida 33850 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHADWICK, CAROL 2117 LOIS BLVD. WINTER HAVEN, FL 33881 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Dorothy Fletcher - Fletcher, Dorothy 2005 Kay Street Lake Alfred, Florida 33850 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Diane D. Craig* DATE: *January 16, 2007* (863) 956-0248

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR