


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90090 005 ****70.00

DOCUMENT # 761421	
1. Entity Name SOUTH LAKE HOLDEN HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 4108 BRANDEIS AVE ORLANDO, FL 32839 US	Mailing Address PO BOX 561640 ORLANDO, FL 32856-1640 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01212007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2342165		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DUKE, CAROLYN A 4108 BRANDEIS AVE ORLANDO, FL 32839		7. Name and Address of New Registered Agent Name MAURICE M. MURPHY Street Address (P.O. Box Number is Not Acceptable) 3913 Dekalb Pl. City Orlando FL Zip Code 32839	
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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 MAURICE M. MURPHY MAURICE M. MURPHY 3/27/07
Signature, typed or printed name of registered agent and then applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	PD SPENCER, JIM 4507 JUDY CT ORLANDO, FL 32839 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVID JOHNSON - P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4617 Brandeis Ave Orlando, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PICKERING, DAWN 4112 BRADLEY AVE ORLANDO, FL 32839 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAWN PICKERING - VP <input type="checkbox"/> Change <input type="checkbox"/> Addition 4112 Bradley Ave Orlando, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KEITER, CHARLOTTE 4102 BRANDEIS AVE. ORLANDO, FL 32839 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JO WHEELER - VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3828 Bainbridge Ave Orlando, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD REED, BECKY 3819 BRANDEIS AVE ORLANDO, FL 32839 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIVIAN GARY-GIBSON - S <input type="checkbox"/> Change <input type="checkbox"/> Addition 303 Pool Little St. Orlando, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DUKE, CAROLYN A 4108 BRANDEIS AVE ORLANDO, FL 32839 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAURICE M. MURPHY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3913 Dekalb Pl. Orlando, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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: MAURICE M. MURPHY 3/27/07 407655-6817
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #