2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765641

FILED Mar 04, 2009 Secretary of State

Entity Name: WESTERN SHORES SECOND ADDITION ASSOCIATION, INC.

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

34213 ISLAND DRIVE LEESBURG, FL 34788 US

Current Mailing Address: New Mailing Address:

P.O. BOX 895614

LEESBURG, FL 34789 US

FEI Number: 59-2232426 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:

POPKA, JEANETTE REESE, DIANE M 34243 ISLAND DR 34213 ISLAND DR

LEESBURG, FL 34788 LEESBURG, FL 34788 US 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: DIANE M. REESE 03/04/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VD () Delete (X) Change () Addition

HAROLD, LOSO REESE, DIANE M Name: Name: 34348 ISLAND DR Address: 34213 ISLAND DR Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788 US

Title: PD () Delete Title: VD (X) Change () Addition REESE, DIANE Name: LOSO, HAROLD Name:

Address: 34213 ISLAND DR Address: 34348 ISLAND DR. City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788 US

Title: () Delete Title: SD (X) Change () Addition SESNIAK, LEONARD WATSON, GAIL Name: Name:

34226 ISLAND DR 12031 WESTERN SHORES LN Address: Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788 US

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

Name: POPKA, JEANETTE Name: RIDER, KENNETH L 34243 ISLAND DR Address: Address: 34230 HODGES RD City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788 US

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

WATSON, GAIL NAVARRO, CURT Name: Name: 12031 WESTERN SHORES DR 34205 ISLAND DR Address: Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: LEESBURG, FL 34788 US

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: KENNETH L RIDER TD 03/04/2009