2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767328

FILED Feb 23, 2008 Secretary of State

Entity Name: BAY LAGOON COMMUNITY ASSOCIATION, INC.

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

BAY LAGOON COMMUNITY ASSOCIATION BOX 521322

BOX 521322

LONGWOOD, FL 32750 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

BLHA BAY LAGOON COMMUNITY ASSOCIATION

BOX 521322 BOX 521322

LONGWOOD, FL 32750 LONGWOOD, FL 32750

FEI Number: 59-2472739 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:

STEIN, RONALD COLLINS, DALE 1374 NORTH MARCY DR 1358 NORTH MARCY DR

LONGWOOD, FL 32750 US LONGWOOD, FL 32750 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: DALE COLLINS 02/23/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P/D (X) Change () Addition () Delete

ZORRILLLA, MAXIMO RENUART, JONATHON Name: Name: 1365 N. MARCY DR Address: 1363 N. MARCY DR Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: () Delete Title: D/VP (X) Change () Addition

Name: STEIN, RONALD Name: BOWEN, TODD Address: 1374 NORTH MARCY DR Address: 1364 NORTH MARCY DR

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: () Delete Title: D/ST (X) Change () Addition FIDANZA, ANTONIO Name: COLLINS, DALE Name:

1358 NORTH MARCY DR Address: 1345 NORTH MARCY DR Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

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: DALE COLLINS D/ST 02/23/2008