2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# 770489

Entity Name: RAVINES RESORT CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AWAKENINGS ACCOC. MGMT, INC.
4213 CNTY RD 218, STE 1
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

C/O AWAKENINGS ACCOC. MGMT, INC.
4213 CNTY RD 218, STE 1
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 59-2366197 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINDELL FARSON PINCKET & DAVIS, P.A.
12276 SAN JOSE BLVD.
#126
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CLAXTON, ERIC
Address: 2930 RAVINES ROAD #1228
City-St-Zip: MIDDLEBURG, FL 32068

Title: DS ( ) Delete
Name: STAPLETON, LINDA
Address: 2948 RAVINES RD #1207
City-St-Zip: MIDDLEBURG, FL 32068

Title: TD ( ) Delete
Name: MILLER, WILLIAM B
Address: 2910 RAVINES ROAD, #1128
City-St-Zip: MIDDLEBURG, FL 32068

Title: DP ( ) Delete
Name: PINSON, BECKY
Address: 3175 RAVINES ROAD #3703
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: BECKY PINSON P 05/01/2007

Electronic Signature of Signing Officer or Director — Date