

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065248

FILED
Mar 21, 2007
Secretary of State

Entity Name: INTERLAKEN PROPERTY OWNERS ASSOCIATION, LLC

Current Principal Place of Business:

1700 N. ORANGE AVENUE
SUITE 100
ORLANDO, FL 32804

New Principal Place of Business:

1610 LAKEN COVE LANE
ORLANDO, FL 32804

Current Mailing Address:

1700 N. ORANGE AVENUE
SUITE 100
ORLANDO, FL 32804

New Mailing Address:

1610 LAKEN COVE LANE
ORLANDO, FL 32804

FEI Number: 20-1596847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIVEY, GLEN L
1700 N. ORANGE AVENUE
SUITE 100
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

PINEL, JOHN B
1610 LAKEN COVE LANE
ORLANDO, FL 32804 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: JOHN B. PINEL

03/21/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SPIVEY, GLEN L
Address: 1700 N. ORANGE AVENUE, SUITE 100
City-St-Zip: ORLANDO, FL 32804

Title: MGR (X) Delete
Name: PINEL, JOHN
Address: 1700 N. ORANGE AVENUE, SUITE 100
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PINEL, JOHN B
Address: 1610 LAKEN COVE LANE
City-St-Zip: ORLANDO, FL 32804

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN B. PINEL

MGR

03/21/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date