2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003716

FILED Apr 25, 2007 Secretary of State

Entity Name: COLONY GROVES HOMEOWNERS ASSOCIATION OF SARASOTA, INC.

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

4586 ASHTON RD 5368 LEVI LANE

SARASOTA, FL 34233 SARASOTA, FL 34233

Current Mailing Address: New Mailing Address:

4586 ASHTON RD 5368 LEVI LANE

SARASOTA, FL 34233 SARASOTA, FL 34233

FEI Number: 65-1087332 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:

SILBERSTIEN, DAVID M LANGENEGER, SCOTT 1633 RIDGEWOOD LANE LANGENEGER SCOTT 5368 LEVI LANE

SARASOTA, FL 34231 US SARASOTA, FL 34233 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: SCOTT LANGENEGER 04/25/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PTD () Delete Title: PRES (X) Change () Addition

 Name:
 LAWRENCE, F. STEPHEN
 Name:
 LANGENEGER, SCOTT

 Address:
 1633 RIDGEWOOD LANE
 Address:
 5368 LEVI LANE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34233

Title: VSD () Delete Title: VP (X) Change () Addition Name: LAWRENCE, LORI Name: HOOVER, JEFF

 Name:
 LAWRENCE, LORI
 Name:
 HOOVER, JEFF

 Address:
 1633 RIDGEWOOD
 Address:
 5376 LEVI LANE

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34233

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

 Name:
 LAWRENCE, JESSICA LEE
 Name:
 THOMAS, LINDA

 Address:
 5303 LEVI LANE
 Address:
 5351 LEVI LANE

 City-St-Zip:
 SARASOTA, FL 34233
 City-St-Zip:
 SARASOTA, FL 34233

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

 Name:
 Name:
 BRYANT, JUDY

 Address:
 5367 LEVI LANE

 City-St-Zip:
 City-St-Zip:
 SARASOTA, FL 34233

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: JUDY BRYANT TRES 04/25/2007