2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007624

FILED May 01, 2007 Secretary of State

Entity Name: LAKE CAMILLE CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

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

2180 W. ST. RD. 434 2211 EAST 5TH STREET **SUITE 5000 UNIT #25**

LONGWOOD, FL 327795044 LEHIGH ACRES, FL 33972

New Mailing Address: **Current Mailing Address:**

2180 W. ST. RD. 434 P.O. BOX 33178

SUITE 5000 SEATTLE, WA 981330178

LONGWOOD, FL 327795044

FEI Number: 16-1666674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

> JORDAN, KEVIN L 2201 EAST 5TH STREET **UNIT #25**

LEHIGH ACRES, FL 33972 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: KEVIN L. JORDAN 05/01/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD (X) Change () Addition () Delete JONES, DARLENE HOPKINS, TERESA Name: Name: 1217 HANCOCK B22 Address: 2211 EAST 5TH STREET #24 Address: CAPE CORAL, FL 33990 City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33972

Title: STD () Delete Title: STD (X) Change () Addition Name: JORDAN, KEVIN Name: HUDGINS, CHAD

Address: 2201 E 5TH ST #25 Address: 2211 E 5TH ST #25 City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: LEHIGH ACRES, FL 33972

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

LEVINE, ROBIN Name: JORDAN, KEVIN Name: 312 TRUMAN AVENUE 7466 COUNTY ROAD 205 Address: Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: FOREST, OH 45843

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: KEVIN L. JORDAN PD 05/01/2007