2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007
Secretary of State

DOCUMENT# N01000001571

Entity Name: HOLLEY-KING LAKES PROPERTY OWNERS ASSOCIATION INC.

Current Principal Place of Business:

580 HOLLEY-LAKE RD.
DEFUNIAC SPRINGS, FL 32433

New Principal Place of Business:

580 HOLLEY-LAKE RD.
DEFUNIAK SPRINGS, FL 32433

Current Mailing Address:

580 HOLLEY-LAKE RD.
DEFUNIAC SPRINGS, FL 32433

New Mailing Address:

580 HOLLEY-LAKE RD.
DEFUNIAK SPRINGS, FL 32433

FEI Number: 31-1486291 **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:

RICHEY, DONNA
1009 N. 14TH ST.
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

RICHEY, DONNA
601 SOUTH 9TH STREET
LEESBURG, FL 34748 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: _____ 07/13/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LARUE, CARL A
Address: 10150 E PIKE
City-St-Zip: CAMBRIDGE, OH 43725

Title: D ( ) Delete
Name: LARUE, WILLIAM L
Address: 10150 E PIKE
City-St-Zip: CAMBRIDGE, OH 43725

Title: D ( ) Delete
Name: LARUE, DANIEL
Address: 10150 E PIKE
City-St-Zip: CAMBRIDGE, OH 43725

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:

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: CARL A. LARUE D 07/13/2007
Electronic Signature of Signing Officer or Director — Date