2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# N01000003129

Entity Name: MOUNT DORA 2010, INC.

Current Principal Place of Business:

408 N TREMAIN STREET
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

408 N TREMAIN STREET
MOUNT DORA, FL 32757

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURR, A L
408 N TREMAIN STREET
MOUNT DORA, FL 32757 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: P ( ) Delete
Name: HOWARD, ROBERT
Address: 2017 HILLSIDE ST.
City-St-Zip: MOUNT DORA, FL 32757

Title: VP ( ) Delete
Name: LIND, DALE
Address: 250 BROOKEFIELD AVE.
City-St-Zip: MOUNT DORA, FL 32757

Title: S ( ) Delete
Name: BURR, ANDREA
Address: 206 E. 9TH AVE.
City-St-Zip: MOUNT DORA, FL 32757

Title: T ( ) Delete
Name: MENSINGER, BETTY
Address: 600 NORTH DONNELLY ST.
City-St-Zip: MOUNT DORA, FL 32757

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: T (X) Change ( ) Addition
Name: HENSINGER, BETTY
Address: 600 NORTH DONNELLY ST.
City-St-Zip: MOUNT DORA, FL 32757

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 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: ROBERT HOWARD P 04/26/2006

Electronic Signature of Signing Officer or Director — Date