2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003642

FILED Jan 30, 2007 Secretary of State

Entity Name: THE GREATER LADY LAKE DOG PARK ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business: 2748 PLAINRIDGE LOOP ROLLING ACRES SPORTS COMPLEX LADY LAKE, FL 32162 LADY LAKE, FL 32162 **Current Mailing Address: New Mailing Address:** P.O. BOX 1599 LADY LAKE, FL 32158 FEI Number: 59-3713450 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: GALLUZZO, SHARON R 17252 SE 121ST AVENUE SUMMERFIELD, FL 34491 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MARCHANT, NANCY Name: Name: 2748 PLAINRIDGE LOOP Address: Address: City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: Title: Title: (X) Change () Addition () Delete SPOTTS, PAT Name: GIRANIO, MARY Name: Address: 17324 98TH CIRCLE Address: 1213 FLORES AVE City-St-Zip: SUMMERFIELD, FL 32162 City-St-Zip: THE VILLAGES, FL 32159 Title: () Delete Title: () Change () Addition GALLUZZO, SHARON R Name: Name: 17252 SE 121ST AVE Address: Address: City-St-Zip: STONECREST, FL 34491 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: JEFFRIES, SHARON Name: BLEAUVELT, SUE Address: 2051 CALLAWAY Address: 720 BOLIVAR ST City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: THE VILLAGES, FL 32159 Title: () Delete Title: (X) Change () Addition JACOBY, SUE HALL, BOB Name: Name: 2422 AMBER CIRCLE 1148 CHAPARRAL DR Address: Address: City-St-Zip: THE VILLAGES, FL 32162 City-St-Zip: THE VILLAGES, FL 32159 Title: () Delete Title: () Change () Addition GIBSON, ART Name: Name: Address: 1006 SIERRA BLANCA CT Address: LADY LAKE, FL 32159 City-St-Zip: 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 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: SHARON R. GALLUZZO MS 01/30/2007