2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005406

FILED May 01, 2008 Secretary of State

Entity Name: THE RESERVE AT LAKE MARY HOMEOWNERS ASSOCIATION, INC.

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

1485 INTERNATIONAL PARKWAY 201 W CANTON AVENUE

SUITE 1051 SUITE 125 A

LAKE MARY, FL 32746 WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1485 INTERNATIONAL PARKWAY 201 W CANTON AVENUE SUITE 1051 SUITE 125 A

LAKE MARY, FL 32746 WINTER PARK, FL 32789

FEI Number: 59-3737838 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:

ALL ABOUT MANAGEMENT, INC,

1485 INTERNATIONAL PARKWAY

SUITE 1051

LAKE MARY, FL 32746 US

ALL ABOUT MANAGEMENT, INC,

201 W. CANTON AVENUE

SUITE 125 A

WINTER PARK, FL 32789 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: 05/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DEVIERE, ROB
 Name:
 DEVIERE, ROB

 Address:
 399 BAYMOOR WAY
 399 BAYMOOR WAY

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:
 LAKE MARY, FL 32746

Title: VPD () Delete Title: VP (X) Change () Addition Name: SCHOFIELD, JOE Name: SCHOFIELD, JOE

Address: 825 ARBORMOOR PLACE Address: 825 ARBORMOOR PLACE
City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

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

 Name:
 REINDL, FRANK
 Name:

 Address:
 785 RANTOUL LANE
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 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: ANGELIA L GORDON RA 05/01/2008

Electronic Signature of Signing Officer or Director

Date