2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007
Secretary of State

DOCUMENT# N01000006612

Entity Name: CORNER LAKES ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 02-0563815 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD ( ) Delete
Name: FRIEDMAN, GEORGE
Address: 411 CENTRAL PARK AVE
City-St-Zip: SANFORD, FL 32771

Title: VPD ( ) Delete
Name: GREENAWALT, THOMAS H
Address: 411 CENTRAL PARK AVE
City-St-Zip: SANFORD, FL 32771

Title: STD ( ) Delete
Name: WEST, EVELYN
Address: 411 CENTRAL PARK AVE
City-St-Zip: SANFORD, FL 32771

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LINDLEY, KEVIN
Address: 16955 CORNER HILL CT
City-St-Zip: ORLANDO, FL 32820

Title: STD (X) Change ( ) Addition
Name: OWENS, GAYLE
Address: 1814 CORNERVIEW LN
City-St-Zip: ORLANDO, FL 32820

Title: D (X) Change ( ) Addition
Name: BOYD, MARTIN
Address: 1815 CORNERVIEW LN
City-St-Zip: ORLANDO, FL 32820

Title: D ( ) Change (X) Addition
Name: WHITTAKER, DANA
Address: 2018 CORNER TREE CT
City-St-Zip: ORLANDO, FL 32820

Title: D ( ) Change (X) Addition
Name: MURRAY, WILLIAM S
Address: 1924 CORNER SCHOOL DR
City-St-Zip: ORLANDO, FL 32820

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: KEVIN LINDLEY PD 03/30/2007

Electronic Signature of Signing Officer or Director — Date