2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005714

FILED Apr 26, 2007 Secretary of State

Entity Name: LAKE BARRINGTON 4C CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O THE WARNER CORP 886 110TH AVENUE NORTH, #7 NAPLES, FL 34108 **Current Mailing Address: New Mailing Address:** C/O THE WARNER CORP 886 110TH AVENUE NORTH, #7 NAPLES, FL 34108 FEI Number: 42-1559655 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: WARNER, BRYAN J 886 110TH AVENUE NORTH #7 NAPLES, FL 34108 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 (X) Change () Addition LACASSE, HOLLY LACASSE, HOLLY Name: Name: 1091 SEAGRAPE DRIVE Address: 1091 SEAGRAPE DRIVE Address: City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 Title: VPTD () Delete Title: (X) Change () Addition CARDASCIA, CARL Name: CARDASCIA, CARL Name: Address: 4884 HAMPSHIRE CT #104 Address: 4884 HAMPSHIRE CT #104 City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: (X) Change () Addition CARMEN, FRANK CARMAN, FRANK Name: Name: 4883 HAMPSHIRE CT., #301 4883 HAMPSHIRE CT., #301 Address: Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: () Change (X) Addition Name: Name: CATRON, DAVID 4874 HAMPSHIRE COURT #305 Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34112 Title: () Delete Title: () Change (X) Addition SCALA, RICHARD Name: Name: 4884 HAMPSHIRE COURT #202 Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34112

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: FRANK CARMAN P 04/26/2007