

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006443

FILED
Apr 30, 2007
Secretary of State

Entity Name: VALENCIA LAKES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

%KEY'S CALDWELL, INC.
1162 INDIAN HILLS BOULEVARD
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

%KEY'S CALDWELL, INC.
1162 INDIAN HILLS BOULEVARD
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 82-0562742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEYS-CALDWELL, INC.
1162 INDIAN HILLS BOULEVARD
VENICE, FL 34293 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: AUBREY, KEN
Address: 137 VALENCIA LAKES
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: HARRIS, RAY
Address: 193 VALENCIA LAKES
City-St-Zip: VENICE, FL 34292

Title: TD () Delete
Name: FARRELL, ED
Address: 121 VALENCIA LAKES
City-St-Zip: VENICE, FL 34292

Title: SD () Delete
Name: SKINNER, PRESTON
Address: 104 CALA COURT
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: CAMPBELL, ROBERT
Address: 108 CALA COURT
City-St-Zip: VENICE, FL 34292

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: WELLS, JON
Address: 109 CALA CRT
City-St-Zip: VENICE, FL 34292

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: D () Change (X) Addition
Name: SEARS, MARK
Address: 117 CALA COURT
City-St-Zip: VENICE,, FL 34292

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: PRESTON SKINNER

SD

04/30/2007

Electronic Signature of Signing Officer or Director

Date