2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2007 8:00 am Secretary of State DOCUMENT # N02543 01-25-2007 90057 040 ****70.00 LAKÉ REGION HOMES, INC. Principal Place of Business Mailing Address 40005835 PO BOX 491000 515 W MAIN ST LEESBURG, FL 34748 P.O. BOX 491000 LEESBURG, FL 34749-1000 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2411947 City & State Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \mathbf{X} 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMERICAN INFORMATION SVCS, INC. Street Address (P.O. Box Number is Not Acceptable) 401 E JACKSON ST, STE 1700 TAMPA, FL 33602 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Change ■ Addition JACKSON, TERRY Jackson, Terry W. NAME NAME 201 N LEE STREET 728 Lake Dora Drive STREET ADDRESS STREET ADDRESS Tavares, FL 32778 CITY-ST-ZIP LEESBURG, FL CITY-ST-ZIP CD CD ☐ Delete TITLE TITLE Change Addition DUNCAN, BRUCE G Duncan, Bruce G. Duncan NAME NAME STREET ADDRESS 308 F. FIETH AVENUE STREET ADDRESS 1300 Citizens Boulevard Leesburg, FL 32748 CITY-ST-ZIP MOUNT DORA, FL 32757 CITY-ST-ZIP TITLE ☐ Delete TITLE SD Change ☐ Addition Keedy, Dorothy KEEDY, DOROTHY NAME NAME STREET ADDRESS PO BOX 1068 STREET ADDRESS P O Box 7800 Tavares, FL 32778 CITY-ST-ZIP TAVARES, FL 32778 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MORRIS, TIMOTHY NAME 9605 SILVER LAKE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG, FL 34788 CITY - ST - ZIP TITLE **PCEO** ☐ Delete TITLE Change ☐ Addition CHERRY, JONATHAN M STREET ADDRESS PO BOX 491000 STREET ADDRESS CITY-ST-7IP LEESBURG, FL 347491000 CITY-ST-7IP TD TITLE TD ☐ Delete TITLE Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY - ST - ZIP

AROGROSS, PAUL

1730 PENINSULA DR

TAVARES, FL 32778

Jonathan M. Cherry AND TYPED OF PRINTED NAME OF SIGNING President/CEO //8/07

Gross, Paul

1730 Peninsula

Tavares, FL 32778

FILED