2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02742

FILED Feb 02, 2009 Secretary of State

Entity Name: CALOOSA LAKE VILLAGE LAND OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: GAYLORD VAN ASDALE 241 LAKE BLVD. LAKE WALES, FL 33859 **New Mailing Address: Current Mailing Address: GAYLORD VAN ASDALE** 241 LAKE BLVD. LAKE WALES, FL 33859 FEI Number: 59-2768201 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: VAN ASDALE, GAYLORD 241 LAKE BLVD. LAKE WALES, FL 33859 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition HILL, JO ANN MCKENDREE, MAC Name: Name: 4625 CALOOSA BLVD Address: 142 CALOOSA LAKE CIRCLE S. Address: City-St-Zip: LAKE WALES, FL 33859 City-St-Zip: LAKE WALES, FL 33859 Title: Title: SD (X) Change () Addition () Delete COCUMDO, ALICE Name: COCUMDO, ALICE Name: Address: 232 2ND AVE. NORTH Address: 232 2ND AVE. NORTH City-St-Zip: LAKE WALES, FL 33853 City-St-Zip: LAKE WALES, FL 33853 Title: () Delete Title: () Change () Addition BEADLE, ROBERT Name: Name: 229 CACOOSA LAKE CIR S Address: Address: City-St-Zip: LAKE WALES, FL 33859 City-St-Zip: (X) Change () Addition Title: SD () Delete Title: Name: BROOKS, TOMMY Name: BROOKS, TOMMY 241 CALOOSA LAKE CIR S Address: Address: 241 CALOOSA LAKE CIR S City-St-Zip: LAKE WALES, FL 33859 City-St-Zip: LAKE WALES, FL 33859 Title: () Delete Title: () Change () Addition VAN ASDALE, GAYLORD Name: Name: 241 LAKE BLVD. Address: Address: City-St-Zip: LAKE WALES, FL 33859 City-St-Zip: Title: () Delete Title: () Change (X) Addition HILL, JO ANN Name: Name: Address: Address: 222 LAKE BLVD. LAKE WALES, FL 33859 City-St-Zip: 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: GAYLORD VAN ASDALE TD 02/02/2009