2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006
Secretary of State

DOCUMENT# N03000001912

Entity Name: OAK HAMMOCK PRESERVE COMMUNITY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S ORANGE AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-0599249 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
8009 S ORANGE AVENUE
ORLANDO, FL 32809 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: VD ( ) Delete
Name: KEEN, ALLAN E
Address: 1312 BRIDGEPORT DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: PD ( ) Delete
Name: FOLK, JAY E
Address: 1275 SIDNEY COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD ( ) Delete
Name: KIRST, CHERYL M
Address: 1025 LAKE GRACIE DRIVE
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change ( ) Addition
Name: WILSON, JENNIFER M
Address: 1031 W. MORSE BLVD. SUITE 325
City-St-Zip: WINTER PARK, FL 32789

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

Title: DV (X) Change ( ) Addition
Name: KIRST, CHERYL M
Address: 1025 LAKE GRACIE DRIVE
City-St-Zip: EUSTIS, FL 32726

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: JAY FOLK DP 04/18/2006

Electronic Signature of Signing Officer or Director — Date