


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90072 039 ****70.00

DOCUMENT # N03000003795	
1. Entity Name WAVERLY GREENS AT CARLTON LAKES, INC.	

Principal Place of Business C/O BENJAMIN STANTON 6462 WAVERLY GREEN WAY NAPLES, FL 34110	Mailing Address C/O BENJAMIN STANTON 6462 WAVERLY GREEN WAY NAPLES, FL 34110
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40037300



2. Principal Place of Business - No P.O. Box # C/O GREGG KERRAR	3. Mailing Address 6510 WAVERLY GREEN WAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.

03122007 Chg-NP CR2E037 (12/06)

City & State NAPLES, FL	City & State NAPLES, FL
Zip 34110	Zip 34110
Country USA	Country USA

4. FEI Number 33-1085555	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent STANTON, BENJAMIN D MR 6462 WAVERLY GREEN WAY NAPLES, FL 34110	
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7. Name and Address of New Registered Agent Name GREGG KERRAR Street Address (P.O. Box Number is Not Acceptable) 6510 WAVERLY GREEN WAY City NAPLES FL Zip Code 34110	
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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 _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STANTON, BENJAMIN D MR 6462 WAVERLY GREEN NAPLES, FL 34110 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPHEN BARKER 6521 WAVERLY GREEN WAY NAPLES, FL 34110 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RASMUSSEN, OLAF MR 6815 WAVERLY GREEN WAY NAPLES, FL 34110 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARL DAVID WALKER 6505 WAVERLY GREEN WAY NAPLES, FL 34110 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KERRAR, GREGG MR 6510 WAVERLY GREEN WAY NAPLES, FL 34110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CERRA, FRANK MR 6517 WAVERLY GREEN WAY NAPLES, FL 34110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VON ROMER, LUCINDA MRS 6475 WAVERLY GREEN WAY NAPLES, FL 34110 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Gregg Kerrar* **3/14/07** **239 597-2457**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone