2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

SIGNATURE:

Secretary of State **DOCUMENT # N03000004715** 01-29-2008 90025 004 ****61.25 VERANDAH HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 2628 VERANDAH VUE DRIVE 2628 VERANDAH VUE DRIVE LAKELAND, FL 33812 LAKELAND, FL 33812 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 802 PO BOX Suite, Apt. #, etc. Suite, Apt. #, etc. 01222008 Chg-NP CR2E037 (12/06) Applied For City & State 4. FEI Number 65-1192998 City & State Highland Not Applicable Zip Zip Country Country \$8.75 Additional ИS 5. Certificate of Status Desired 33846 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent POLIN, RICHARD M 2628 VERANDAH VUE DRIVE Street Address (P.O. Box Number is Not Acceptable) LAKELAND, FL 33812 2737 Verandah Vuc Way 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, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE Addition TITLE TREUSURE NAME POLIN, RICHARD M CHRIS Martin NAME 737 Verandah Vue War STREET ADDRESS 2628 VERANDAH VUE DR. STREET ADDRESS LAKELAND, FL 33812 keland fi CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE President Addition NAME MEINKE, PHIL NAME 2640 VERANDAH VUE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GLOTFELTY, RANDY NAME NAME 2647 VERANDAH VUE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED Jan 29, 2008 8:00 am

Davrime Phone #