2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

DOCUMENT# N03000009453

Entity Name: LAKE CHARM COUNTRY ESTATES HOA, INC.

Current Principal Place of Business:

1180 SPRING CENTER SOUTH BLVD SUITE 340
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

8009 SOUTH ORANGE AVE
ORLANDO, FL 32809

Current Mailing Address:

8009 SOUTH ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-0366158 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARKNESS, KAREN ESQ.
6767 N. WICKHAM ROAD, SUITE 500
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT
8009 SOUTH ORANGE AVE
ORLANDO, FL 32809 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: REBECCA FURLOW 04/28/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: MITCHEM, WILLIAM R
Address: 11875 HIGH TECH AVE., #100A
City-St-Zip: ORLANDO, FL 32817

Title: DVS ( ) Delete
Name: WOFFORD, KENNETH
Address: 11875 HIGH TECH AVE. #100A
City-St-Zip: ORLANDO, FL 32817

Title: T/S ( ) Delete
Name: KIRWAN, GLENN
Address: 12001 SCIENCE DR. #160
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ORME, BRIAN
Address: 785 COUNTRY CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: VPD (X) Change ( ) Addition
Name: SALCEDO, JAIME A
Address: 945 COUNTRY CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: STD (X) Change ( ) Addition
Name: FELKER, JOEL D
Address: 930 COUNTRY CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

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: BRIAN ORME PD 04/28/2007
Electronic Signature of Signing Officer or Director Date