2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007
Secretary of State

DOCUMENT# N04000001913

Entity Name: WEST PUTNAM LAKE REGION ASSOCIATION, INC.

Current Principal Place of Business:

875 LAKE KEMPTON DRIVE
HAWTHORNE, FL 32640 US

New Principal Place of Business:

Current Mailing Address:

875 LAKE KEMPTON DRIVE
HAWTHORNE, FL 32640 US

New Mailing Address:

FEI Number: 20-0774527 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CATHLINO, PHILLIP
875 LAKE KEMPTON DRIVE
HAWTHORNE, FL 32640 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:	P/D	( ) Delete
Name:	CATHLINO, PHILLIP	
Address:	875 LAKE KEMPTON DRIVE	
City-St-Zip:	HAWTHORNE, FL 32640 US	
Title:	TRES	( ) Delete
Name:	CATHLINO, SARAH	
Address:	875 LAKE KEMPTON DRIVE	
City-St-Zip:	HAWTHORNE, FL 32640 US	
Title:	D	( ) Delete
Name:	PETERS, KEITH	
Address:	1163 CR 20A	
City-St-Zip:	HAWTHORNE, FL 32640 US	
Title:	DIR	( ) Delete
Name:	WHITE, WILLIAM	
Address:	570 SOUTH CR 21	
City-St-Zip:	HAWTHORNE, FL 32640 US	
Title:	D	( ) Delete
Name:	PECK, GARY	
Address:	100 WEST COWPEN LAKE RD	
City-St-Zip:	HAWTHORNE, FL 32640 US	
Title:	D	( ) Delete
Name:	HEYSER, GAIL	
Address:	186 EAST COWDEN LAKE POINT DR	
City-St-Zip:	HAWTHORNE, FL 32640 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PHILLIP CATHLINO PRES 04/19/2007

Electronic Signature of Signing Officer or Director — Date