2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003215

FILED May 06, 2005 Secretary of State

Entity Name: OSCEOLA LAKEFRONT PROPERTY OWNERS ASSOCIATION INC

Current Principal Place of Business: New Principal Place of Business:

C/O CAMERON GARMS C/O 13730 PLAINVIEW RD. 19622 LAKE OSCEOLA LANE ODESSA, FL 33556

ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

C/O CAMERON GARMS
C/O 13730 PLAINVIEW RD.
19622 LAKE OSCEOLA LANE
ODESSA, FL 33556

ODESSA, FL 33556

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STACK, KATHY

19624 LAKE OSCEOLA LANE

ODESSA, FL 33556 US

PIKE, TIMOTHY B

13730 PLAINVIEW RD.

ODESSA, FL 33556 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: TIMOTHY B. PIKE 05/06/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PRES (X) Change () Addition

 Name:
 GARMS, CAMÉRON
 Name:
 PIKE, TIMOTHY B

 Address:
 19622 LAKE OSCEOLA LANE
 Address:
 13730 PLAINVIEW RD.

 City-St-Zip:
 ODESSA, FL 33556 US
 City-St-Zip:
 ODESSA, FL 33556 US

Title: VD () Delete Title: VP (X) Change () Addition

 Name:
 STACK, KATHY
 Name:
 KNOST, DOUG

 Address:
 19624 LAKE OSCEOLA LANE
 Address:
 19923 GUNN HWY.

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 ODESSA, FL 33556 US

Title: STD () Delete Title: SEC (X) Change () Addition

 Name:
 WESTLAKE, DAVID
 Name:
 ANDERSON, ALISA

 Address:
 19713 GUNN HIGHWAY
 Address:
 13936 PLAINVIEW RD.

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 ODESSA, FL 33556 US

Title: () Delete Title: TRES () Change (X) Addition

 Name:
 Name:
 PERRILLO, CAROL

 Address:
 Address:
 19628 LAKE OSCEOLA LN.

 City-St-Zip:
 City-St-Zip:
 ODESSA, FL 33556 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY B. PIKE PRES 05/06/2005