2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003219

FILED Jun 16, 2009 Secretary of State

Entity Name: OAK LANDING AT IMPERIAL LAKES HOMEOWNER'S ASSOCIATION, INC.

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

5955 T.G. LEE BLVD 6972 LAKE GLORIA BLVD SUITE 300 ORLANDO, FL 32809 US

ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

5955 T.G. LEE BLVD 6972 LAKE GLORIA BLVD SUITE 300 ORLANDO, FL 32809 US ORLANDO, FL 32822

FEI Number: 20-3005444 FEI Number Applied For () FEI Number Not Applicable () 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:

LELAND MANAGEMENT, INC.

5955 T.G. LEE BLVD.

SUITE 300

ORLANDO, FL 32822 US

LELAND MANAGEMENT, INC.

6972 LAKE GLORIA BLVD

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: 06/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ADAMS, WESLEY Name: GRAUBARD, ERICK
Address: 5909-G HAMPTON OAKS PKWY Address: 412 OAK LANDING BLVD

City-St-Zip: TAMPA, FL 33610 City-St-Zip: MULBERRY, FL 33860 US

Title: VPD () Delete Title: VPD (X) Change () Addition Name: MALONE, PAM Name: DELGRECO, GARY

Address: 5909-G HAMPTON OAKS PKWY Address: 488 OAK LANDING BLVD City-St-Zip: TAMPA, FL 33610 City-St-Zip: MULBERRY, FL 33860 US

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

Name:ZEVOLA, JOYCE MName:JOYNER, SUSANAddress:5909-G HAMPTON OAKS PKWYAddress:504 OAK LANDING BLVDCity-St-Zip:TAMPA, FL 33610City-St-Zip:MULBERRY, FL 33860 US

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: ERICK GRAUBARD PD 06/16/2009