2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2008
Secretary of State

DOCUMENT# N05000011745

Entity Name: LAKERIDGE ESTATES AT GLEN ABBEY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1140 ROXBORO RD
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1140 ROXBORO RD
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 20-3886907 **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:

STACY A. ECKERT, P.A.
2445 S VOLUSIA AVE
C-3
ORANGE CITY, FL 32763 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: D ( ) Delete
Name: CONLEY, STEVEN J
Address: 350 NPINE MEADOW DR
City-St-Zip: DEBARYOD, FL 32713

Title: D ( ) Delete
Name: OTTO, MARK
Address: 350 NPINE MEADOW DR
City-St-Zip: DEBARYOD, FL 32713

Title: D ( ) Delete
Name: O'NEIL, TIM J
Address: 1140 ROXBORO RD
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: MOWREY, NANCY
Address: 350 NPINE MEADOW DR
City-St-Zip: DEBARYOD, FL 32713

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

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: TIM J. O'NEIL V.P. 05/29/2008

Electronic Signature of Signing Officer or Director — Date