2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004080

FILED Apr 16, 2007 Secretary of State

Entity Name: KATE'S CROSSING HOMEOWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 7340 N US HWT 27 STE 216 2647 NE 3RD STREET OCALA, FL 34482 OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** 7340 N US HWT 27 STE 216 2647 NE 3RD STREET OCALA, FL 34482 OCALA, FL 34470 FEI Number: 20-4775778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TROW, CHESTER J 21 N MAGNOLIA AVE OCALA, FL 34475 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition LUETGERT, CHRISTOPHER G Name: Name: Address: Address: 2647 NE 3RD STREET City-St-Zip: City-St-Zip: OCALA, FL 34470 Title: Title: () Change (X) Addition () Delete BASS, BRANDON B Name: Name: Address: Address: 2119 SW 1ST AVENUE City-St-Zip: City-St-Zip: OCALA, FL 34474

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: BRANDON B. BASS VP 04/16/2007