

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007649

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** DAVIS PRESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

12651 MCGREGOR BLVD #1-101  
FT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

12651 MCGREGOR BLVD #1-101  
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 20-5006007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALEXSY, MARILYN  
12651 MCGREGOR BLVD #1-101  
FT MYERS, FL 33919 US

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

PRECHEL, OLIVER  
12651 MCGREGOR BLVD #1-101  
FT MYERS, FL 33919 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: OLIVER PRECHEL

04/26/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PRECHEL, OLIVER  
Address: 12651 MCGREGOR BLVD #1-101  
City-St-Zip: FT MYERS, FL 33919

Title: T ( ) Delete  
Name: WINDEY, ROGER  
Address: 12651 MCGREGOR BLVD #1-101  
City-St-Zip: FT MYERS, FL 33919

Title: S ( ) Delete  
Name: SCHWARTZ, TODD  
Address: 12651 MCGREGOR BLVD #1-101  
City-St-Zip: FT MYERS, FL 33919

**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:

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: OLIVER PRECHEL

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date