2008 NOT-FOR-PROFIT CORPORATION

FILED Jan 24, 2008 8:00 am Secretary of State

ANNUAL	REPORT	

DOCUMENT # N0700001883 1. Entity Name CORNERSTONE PROPERTY OWNERS' ASSOCIATION, INC.			01	1-24-2008 9003	8 009 ****61.3	25			
Principal Place 200 LAKE MO LAKELAND, F	ORTON DRIVE, STE 300	Mailing Address 200 LAKE MORTON DRIVI LAKELAND, FL 33801	E, STE 300						
	lace of Business - No P.O. Box #	3. Mailing Address P.O. Box 237							
Suite, Apt.		Suite, Apt. #, etc.		01192008 Ci	hg-NP CR	R2E037 (12/06)			
City & State	y & State City & State Keland, FL Highland City, FL		4. FEI Number 65–130	4. FEI Number Applied For 65–1301744 Not Applicable					
Zip 33812	Country Polk US	Zip 33846	Country	5. Certificate of St		\$8.75 Addi	tional		
33012	6. Name and Address of Current F	<u> </u>	POTK US	7. Name and Add	Iress of New Registe	•			
MARTIN F	SNOW IR		Name						
MARTIN, E. SNOW JR. 200 LAKE MORTON DRIVE, STE 300 LAKELAND, FL 33801			Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
			City			FL Zip Code			
8 The above	named entity submits this statement for	the purpose of changing its re-	aistered office or regi	stered agent, or both, in	the State of Florida.	· — I	and accept		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campi Trust Fund Cor		\$5.00 May Be Added to Fees		check payable to Department of Sta			
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AN	ND DIRECTORS IN	10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CONTROL OF THE POPULATION OF THE POP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROGERS, OSCAR W JR 5371 US 98 SOUTH HIGHLAND CITY, FL 33846	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ROGERS, C. DANE 5371 US 98 SOUTH HIGHLAND CITY, FL 33846	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: C. Dane Rogers 1/21/08 863-646-5187 SIGNATURE AND TYPED OR PINITED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Displaying Phone #									