2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07776

Apr 11, 2007 Secretary of State

Entity Name: EAST LAKE WOODLANDS PINEWINDS CLUSTER HOMES UNIT ONE ASSOCIATION, INC.

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

720 BROOKER CREEK BLVD. #206 OLDSMAR, FL 34677

Current Mailing Address: New Mailing Address:

720 BROOKER CREEK BLVD OLDSMAR, FL 34677

FEI Number: 59-2517414 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:

SCANNAVINO, INC. SCANNAVINO, INC

720 BROOKER CREEK BLVD. #2067 720 BROOKER CREEK BLVD. #206 OLDSMAR, FL 34677 US OLDSMAR, FL 34677 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: 04/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: () Change () Addition

 Name:
 SANDLER, RICHARD
 Name:

 Address:
 220 PINEWINDS BLVD
 Address:

 City-St-Zip:
 OLDSMAR, FL 34677
 City-St-Zip:

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

 Name:
 WARRING, KAY
 Name:
 HALL, DAVE

 Address:
 50 PINEWINDS BLVD.
 Address:
 80 PINEWINDS BLVD.

 City-St-Zip:
 OLDSMAR, FL 34677
 City-St-Zip:
 OLDSMAR, FL 34677

Files VD (Addition

Title: VD () Delete Title: () Change () Addition Name: SILVERMAN, HENRIETTA Name:

Address: 100 SUMMERWIND LANE Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip:

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

 Name:
 JONES, CLYDE
 Name:
 HOLLAND, JOAN

 Address:
 30 MORNING DOVE PLACE
 Address:
 40 PINEWINDS BLVD.

 City-St-Zip:
 OLDSMAR, FL 34677
 City-St-Zip:
 OLDSMAR, FL 34677

Title: VD () Delete Title: D (X) Change () Addition

 Name:
 HALL, RAMONA
 Name:
 RUSSELL, TRACIE

 Address:
 80 PINEWINDS BLVD.
 Address:
 80 SUMMERWIND LANE

 City-St-Zip:
 OLDSMAR, FL 34677
 City-St-Zip:
 OLDSMAR, FL 34677

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: SANDLER, RICHARD TD 04/11/2007