2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N08524 03-20-2006 90018 039 ****61.25 SAVE LAKE WEIR CORPORATION, INC. Principal Place of Business Mailing Address 12030 SE HWY 25 PO BOX 374 OCKLAWANA, FL 32179 WEIRSDALE, FL 32195 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162006 Chg-NP CR2E037 (11/05) City & State 4. FEI Number 59-2640020 City & State Applied For Not Applicable Zìp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ANDERSON, EDWARD M. 12030 SE HWY, 25 Street Address (P.O. Box Number is Not Acceptable) OCKLAWAHA, FL. 32179 Zip Code 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 reafte of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TD TITLE ☐ Delete TITLE ☐ Change Addition KNOB LOCK FORRESTER, CLIFF NAME NAME AVE. RD. 13075 55 STREET ADDRESS 10375 SE SUNSET HARBOR RD STREET ADDRESS 32179 CITY-ST-ZIP SUMMERFIELD, FL 34491 OCKLAWAHA CITY-ST-7IP Change TITLE Delete TITLE Addition KERNAN KERNAN, BILL NAME NAME 128th St. STREET ADDRESS 14291 S E 128TH ST STREET ADDRESS 5 Z 14291 CITY-ST-ZIP OCKLAWAHA, FL. 32179 CITY-ST-ZIP 32/79 OCKLAWAHA VP TITLE TITLE Change Addition ☐ Delete SANDS, JANE NAME NAME P O BOX 1515 STREET ADDRESS STREET ADORESS OCKLAWAHA, FL 32179 CITY-ST-ZIP CITY-ST-ZIP SD ☐ Delete TITLE ☐ Change ☐ Addition TITLE SHARPE, PHYLLIS NAME NAME STREET ADDRESS 12270 E HIGHWAY 25 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OCKLAWAHA, FL 32179 ☐ Delete TITLE TITLE ☐ Change ☐ Addition TREMBLAY, LOU NAME NAME 10457 S E 143RD ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SUMMERFIELD, FL 34491 CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE ANDERSON, ANN NAME 12030 EAST HIGHWAY 25 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP OCKLAWAHA, FL 32179

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.

cliford F. Towester

3/17/06

352-817-1220 OR 352-401-9471 X 24

FILED

Mar 20, 2006 8:00 am