2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 14, 2008 8:00 am Secretary of State

DOCUMENT # NOSSEC

STREET ADDRESS

CHY-ST-ZP

9164 SE 146TH ST.

SUMMERFIELD, FL

DOCUMENT # N08856 03-14-2008 90028 046 ****61.25 1. Entity Name LITTLE LAKE WEIR SUBDIVISION HOME OWNER'S ASSOCIATION OF SUMMERFIELD, FLORIDA INC. Principal Place of Business Mailing Address 14111 SE 92 COURT 14111 SE 92ND CT SUMMERFIELD, FL 34491 US SUMMERFIELD, FL 34491 US 2. Principal Place of Business - No P.O. Box # 9310 SE /4/ LAN 3. Mailing Address 9280 SE 141 LANE Suite, Apt. #, etc.
Summer Suite, Apt. #, etc. 03062008 Chg-NP CR2E037 (12/06) SUMMER City & State 4. FEI Number Applied For 59-2883082 Not Applicable Country . MARION Country \$8.75 Additional 5. Certificate of Status Desired 449 MARION 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JONNIE SPRAGUE, JOANN Street Address (P.O. Box Number is Not Acceptable) 14111 SE 92 COURT SUMMERFIELD, FL 34491 80 5E 141 City Zip Code 34491 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 ura, typed or printed name of receivered event and little if explicable (NOTE: Recurrent Agent 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be П Due by May 1, 2008 Trust Fund Contribution Fiorida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VΡ Detete TITLE TILE ☐ Addition Chance BUCK, EDNA NALAF NAME 14530 SE 91ST TERR STREET ADDRESS STREET ADORESS CITY-ST-ZIP SUMMERFIELD, FL 34491 CTTY-ST-ZE TITLE Delete TITLE ☐ Change ☐ Addition MCCALLUM, BRUCE NAME NAME 9310 SE 141ST LN STREET ADDRESS STREET ADDRESS CITY-ST-7IP SUMMERFIELD, FL 34491 CITY-ST-78 TITLE Delete THE ☐ Change ☐ Addition MCCALLUM, JOAN NAME NAME STREET ADORESS 9310 SE 141ST LN STREET ADDRESS CITY-ST-ZIP SUMMERFIELD, FL 34491 CITY-ST-ZIP TREASURER TITLE TITLE D'Detete Change ■ Addition BONNIE L. SIBBERSON SPRAGUE, JOANN NAME NAME 9280 SE 141 LANE STREET ADDRESS 14111 SE 92 COURT STREET ADDRESS Summer field, FI CITY-ST-ZIP SUMMERFIELD, FL 34491 CITY-ST-ZIP 34491 TITLE Delete TITLE ☐ Change Addition PION, ROGER NAME NAME STREET ADORESS 9215 SE 142ND LN STREET ADDRESS SUMMERFIELD, FL 34491 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete MLE n TITLE ☐ Change ☐ Addition MCKEON, RONALD MAKE NAME

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.

STREET ADDRESS

CITY-ST-ZP

SIGNATURE: _	Donnie Sibbuson	Bonnie	SibbERSON	3-10-08	352-245-46	94
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Date	1	Daytime Phone #	_ •