2008 NOT-FOR-PROFIT CORPORATION

Jan 24, 2008 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT # N16962** 01-24-2008 90030 042 ****70.00 TWIN LAKES CONDOMINIUM NO. ONE OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 40009000 149 N GOLF HARBOR PATH P.O. BOX 2143 INVERNESS, FL 34450 US INVERNESS, FL 34451 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address P.O. BOX 2073 9743 E. GOLDFINCH LANE Suite, Apt. #, etc. Suite, Apt. #, etc. 01192008 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 20-8151244 City & State Applied For FL INVERNESS LUVERNESS Not Applicable Country CITRUS \$8.75 Additional 5. Certificate of Status Desired \mathbf{Z} 34450-2823 -2073 *LTRUS* Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRA M. CATER JARLENSKI, JANE 149 N GOLF HARBOR PATH Street Address (P.O. Box Number is Not Acceptable E. GOLDFINCH INVERNESS, FL 34450 Zip Code 34450 JNVERNESS 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. Lam familiar with, and accept Manager SIGNATURE -Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. TITLE Delete TITLE ■ Addition FALABELLA, COLLEEN NAME NAME STREET ADDRESS 9707 E GOLDFINCH LANE STREET ADDRESS INVERNESS, FL 34450 CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Defete TITLE Change Change ■ Addition POZORSKI DAVID 9765 E. GOLDFIXH LANG NAME POZORSKI, DAVIE STREET ADORESS 9765 E. GOLDFINCH LANE STREET ADDRESS CITY-ST-ZIP INVERNESS, FL 34450 CITY-ST-ZIP JNVERNESS, FL VP TITLE Delete. TITLE Addition KAY WIECZORKOWSKI NAME DIPLECO, ANNA NAMÉ 9767 E. GOLDFINCH LANE STREET ADORESS 9865 E. PEBBLE CREEK COURT STREET ADDRESS INVERNESS, FL 34450 CHY-ST-7P INVERNESS, FL 34450 CITY-ST-702 ☐ Delete TITLE ☐ Change ☐ Addition CATER, DEBRA M NAME NAMI 9743 E. GOLDFINCH LANE STREET ADDRESS STREET ADDRESS INVERNESS, FL 34450 CITY-ST-7(P CITY-ST-ZIP SECRETARY ☐ Delete TITLE THE Addition ☐ Change DEBORAH INSCOE PRILE GOLD FINCH LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZP INVERNESS, FL 34450 ☐ Delete TITLE ☐ 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 arri 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

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

352-860-2259

FILED