2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FHFD **DOCUMENT # N18766** 2007 APR 16 AM 10: 36 CARLENTINI SUBDIVISION OF CAPRI ISLES HOMEOWNERS ASSOCIATION, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1503 STRADA D'ORO 1503 STRADA D'ORO VENICE, FL 34292-1512 US VENICE, FL 34292-1512 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04042007 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0087352 City & State City & State Applied For Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LACHIUSA, JANE E F Street Address (P.O. Box Number is Not Acceptable) 1503 STRADA D'ORO VENICE, FL 34292-1512 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) 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, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Р ☐ Delete TITI F ☐ Change ■ Addition DAILEY, MARVIN R NAME NAME STREET ADDRESS 1501 STRADA D'ORO STREET ADDRESS VENICE, FL 34292 CITY-ST-ZIP CITY-ST-7IF ☐ Change ☐ Addition TITLE ☐ Delete TITLE DIENE, BRUNI NAME NAME 600097964616 04/23/07--01018--025 **61 STREET ADDRESS 1446 STRADA D'ORO STREET ADDRESS VENICE, FL 34292 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition LACHIUSA, JANE E F. NAME NAME STREET ADDRESS 1503 STRADA D'ORO STREET ADDRESS CITY-ST-ZIP VENICE, FL 342921512 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE HINSHAW, CRAIG NAME NAME 1550 STRADA D'ORO STREET ADDRESS STREET ADDRESS VENICE, FL 34292 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PENDERGAST, DORIS NAME NAME 1458 STRADA D'ORO STREET ADDRESS STREET ADDRESS VENICE, FL 34292 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE D KOVALY, BILL NAME NAME 1439 STRADA D'ORO STREET ADDRESS STREET ADDRESS VENICE, FL 34292 CITY-ST-ZIP CITY-ST-ZIP 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. 4/07/87 achusa 941-484-4360

Daytime Phone #