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FILED Jan 25, 2007 8:00 am Secretary of State

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2007	ANNUAL REPORT	4110	<i>,</i> 1,

DOCUMENT # N23018 LAKE FOREST HOMEOWNERS ASSOCIATION OF MOUNT DORA, INC. Principal Place of Business Mailing Address 40005786 4112 LAKE FOREST 4112 LAKE FOREST C/O JOHN PETERSON C/O JOHN PETERSON MOUNT DORA, FL 32757 MOUNT DORA, FL 32757 US US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01162007 CR2E037 (12/06) Chg-NP 4. FEI Number 59-2855900 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PIETRZAK, RICHARD Street Address (P.O. Box Number's Not Acceptable) SAVILLE, RICHARD 4115 LAKE FOREST MOUNT DORA, FL 32757 LAKE FOREST 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 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete TITLE ☐ Change Addition TITLE SUGGS, BILL NAME NAME STREET ADDRESS 4142 LAKE FOREST STREET ADDRESS MOUNT DORA, FL 32757 CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change X Addition TITLE TITLE SAVILLE, RICHARD PIET RZAK, RICHARD NAME NAME 4041 LAKE FOREST MT. DORA, FL 32757 STREET ADDRESS 4115 LAKE FOREST STREET ADDRESS MOUNT DORA, FL 32757 CITY-SI-ZIP CITY-ST-ZIP Defete TITLE ☐ Change TITLE Addition CAPMAN, DAN NAME NAME **4033 LAKE FOREST** STREET ADDRESS STREET ADORESS CITY-ST-ZIP MOUNT DORA, FL 32757 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition PETERSON, JOHN NAME NAME 4112 LAKE FOREST STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MOUNT DORA, FL 32757 TITLE ☐ Delete TITLE Change Addition FORAN, JOHN NAME NAME **4029 LAKE FOREST** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MOUNT DORA, FL 32757 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition SLUSHER, KENNETH NAME NAME STREET ADDRESS 4109 LAKE FOREST STREET ADDRESS MOUNT DORA, FL 32757 CITY-ST-ZIP CHTY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 empo JOHN PETERSON

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNA