

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 31, 2007
Secretary of State

DOCUMENT# N23600

Entity Name: EMBASSY LAKES MASTER OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**3522 EMBASSY DRIVE
COOPER CITY, FL 33026 US**New Principal Place of Business:****Current Mailing Address:**3522 EMBASSY DRIVE
COOPER CITY, FL 33026 US**New Mailing Address:****FEI Number:** 65-0119176**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**EISINGER, DENNIS
4000 HOLLYWOOD BLVD
SUITE 265 SOUTH
HOLLYWOOD, FL 33021 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: MARHEE, STEVEN
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**Title:** STD () Delete
Name: KRONOWITZ, KENNETH G
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**Title:** VPD () Delete
Name: LASHBROOK, DEAN
Address: 3522 EMBASSY DR.
City-St-Zip: COOPER CITY, FL 33026**Title:** PD () Delete
Name: CARL, STEPHEN M
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**Title:** D () Delete
Name: ANDERSON, RICHARD
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: KRONOWITZ, KENNETH G
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**Title:** PD (X) Change () Addition
Name: LASHBROOK, DEAN
Address: 3522 EMBASSY DR.
City-St-Zip: COOPER CITY, FL 33026**Title:** TD (X) Change () Addition
Name: CARL, STEPHEN M
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026**Title:** SD (X) Change () Addition
Name: ANDERSON, RICHARD
Address: 3522 EMBASSY DR
City-St-Zip: COOPER CITY, FL 33026

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEAN LASHBROOK

PD

08/31/2007

Electronic Signature of Signing Officer or Director

Date