2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N24134

Entity Name: AIRPORT LAKES ASSOCIATION, INC.

Current Principal Place of Business:

1534 INDIAN DANCE CT
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

1534 INDIAN DANCE CT
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3035082 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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:	PD	( ) Delete
Name:	LUNDIN, BARRY	
Address:	1534 INDIAN DANCE CT	
City-St-Zip:	MAITLAND, FL 32751	
Title:	D	( ) Delete
Name:	BERKLEY, JAMES V	
Address:	RENAISSANCE ORLANDO HOTEL	
City-St-Zip:	ORLANDO, FL 32812	
Title:	D	( ) Delete
Name:	PORCHENIK, BARBARA	
Address:	7155 N. FRONTAGE RD	
City-St-Zip:	ORLANDO, FL 32812	
Title:	D	( ) Delete
Name:	MULLINS, ROBERT B	
Address:	7160 N. FRONTAGE ROAD, LAQUINTA INNS & STE	
City-St-Zip:	ORLANDO, FL 32312	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: BARRY A. LUNDIN D 04/30/2008

Electronic Signature of Signing Officer or Director — Date