2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2007
Secretary of State

DOCUMENT# N26391

Entity Name: COUNTRY LAKES II MOBILE HOME PARK HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6201 US 41N
#2238
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

6201 US 41N
#2238
PALMETTO, FL 34221 US

New Mailing Address:

FEI Number: 59-2824705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LOTITO, JIM
6201 US HWY 41 N
PALMETTO, FL 34221 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: P ( ) Delete
Name: LOTITO, JIM
Address: 6201 US HWY 41N 2057
City-St-Zip: PALMETTO, FL 34221 US

Title: V ( ) Delete
Name: NAYLOR, FRAN
Address: 6201 US HWY 41 N 2166
City-St-Zip: PALMETTO, FL 34221 US

Title: S ( ) Delete
Name: ALBERY, DORIS
Address: 6201 US HWY 41 N 2135
City-St-Zip: PALMETTO, FL 34221 US

Title: T ( ) Delete
Name: DODGE, JOANN
Address: 6201 US HWY 41 N 2042
City-St-Zip: PALMETTO, FL 34221 US

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: JOANN E. DODGE T 08/20/2007
Electronic Signature of Signing Officer or Director — Date