2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30814

FILED Apr 24, 2006 Secretary of State

Entity Name: BUENAVENTURA LAKES SILVER PARK VILLAS I HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

231 RUBY AVE SUITE B

KISSIMMEE, FL 34741 US

Current Mailing Address: New Mailing Address:

PO BOX 452847

KISSIMMEE, FL 347452847 US

FEI Number: 59-2997824 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ASSOCIATION SOLUTIONS OF CENTRAL FL, INC. PO BOX 452847 SUITE 5000 KISSIMMEE, FL 347452847 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: VAZQUEZ, RAFAEL J Name: VAZQUEZ, RAFAEL J Address: 50 SILVER OAK CIRCLE Address: 1892 NESTLEWOOD TRAIL City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: ORLANDO, FL 328378011 US

(X) Change () Addition Title: VPD () Delete Title: FRANCO, ALVERO Name: MARTINEZ, LUIS A Name: Address: 21 SILVER SWAN CIRCLE Address: 57 SILVER PARK CIRCLE City-St-Zip: KISSIMMEE, FL 34743 City-St-Zip: KISSIMMEE, FL 34743 US

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 MARESCO, DAWN
 Name:
 MARESCO, DAWN

 Address:
 62 SILVER PARK CIRCLE
 Address:
 62 SILVER PARK CIRCLE

 City-St-Zip:
 KISSIMMEE, FL 34743
 City-St-Zip:
 KISSIMMEE, FL 34743 US

I hereby certify that the information supplied with this filing does not qualify for the 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: RAFAEL J. VAZQUEZ P 04/24/2006