2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31621

Apr 25, 2006 Secretary of State

Entity Name: HOMEOWNERS OF LA CITA, PHASE II, INC.

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

3040 LA CITA LANE 710 LAKEWOOD LANE TITUSVILLE, FL 32780 TITUSVILLE, FL 32780 US US

Current Mailing Address: New Mailing Address:

P.O. BOX 2095

TITUSVILLE, FL 327812095 US

FEI Number: 59-2949018 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:

DAVIS, TOM M 710 LAKEWOOD LN TITUSVILLE, FL 32780 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete

(X) Change () Addition

WELLS, WILLIAM DAVIS, TOM Name: Name:

3040 LA CITA LANE Address: 710 LAKEWOOD LANE Address: City-St-Zip: TITUSVILLE, FL 32780 US City-St-Zip: TITUSVILLE, FL 32780 US

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

Name: LONG, JOE Name: HINNANT, SUE Address: 3000 LA CITA LANE Address: 2870 LA CITA LANE City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

Title: VD. () Delete Title: () Change () Addition

LEVA, MARY JANE Name: Name: Address: 790 LAKEWOOD LANE Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip:

() Delete Title: TD Title: TD (X) Change () Addition DANE, TOM

Name: Name: DAVIS, TOM 710 LAKEWOOD LANE Address: Address: 710 LAKEWOOD LANE City-St-Zip: TITUSVILLE, FL 32780 US City-St-Zip: TITUSVILLE, FL 32780 US

Title: () Delete Title: () Change () Addition

ARNETT, WAYNE Name: Name: 2960 LA CITA LANE Address: Address: City-St-Zip: TITUSVILLE, FL 32780 US City-St-Zip:

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

HARTY, MARK Name: Name: Address: Address: 670 LAKEWOOD LANE TITUSVILLE, FL 32780 City-St-Zip: City-St-Zip:

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: WAYNE ARNETT D 04/25/2006