2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCLIMENT # N32522 THE

FILED Mar 01, 2006 8:00 am Secretary of State

| 1. Entity Nam | MENT # N32522 AKE PROPERTY OWN | | 03-01-2006 900 | 14 015 ****70. | .00 | | | | | |
|--|--|-------------------------------|--|---|---|--|--------------------------------------|------------------------------|--|--|
| P.O. BOX 65 P.O. | | | ddress (65 S, FL 32053 | • | | | | | | |
| 2. Principal Place of Business 3. Ma | | | Address | | | | | | | |
| Suite, Apt. #, etc. S | | Suite, | Apt. #, etc. | | 01182006 | 01182006 Chg-NP CR2E037 (11/05) | | | | |
| City & State | | City & | City & State | | 4. FEI Number 59-30862 | 4. FEI Number 59-3086233 | | | | |
| Zip | Country | Country Zip | | Country | | | | 75 Additional Required | | |
| | 6. Name and Address of Cu | rrent Registered A | gent | Name | 7. Name and Ac | dress of New Regis | tered Agent | | | |
| | , RHETT 'H OHIO AVENUE , FL 32064 | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | | | | City | | | FL Zip Code | , | | |
| | named entity submits this statem tions of registered agent. | ent for the purpose | of changing its rec | gistered office or | registered agent, or both, | in the State of Florida | . I am familiar with, | and accept | | |
| SIGNATURE . | Signature, typed or printed name of registerer | d agent and title if applicab | le, (NOTE: Pe | egistered Agent signat | ure required when reinstating) | | DATE | | | |
| | Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campa Trust Fund Con | - | \$5.00 May Be Added to Fees | · · | check payable to Department of St | L L | | |
| 10. | OFFICERS AN | ID DIRECTORS | | 11, | ADDITIONS/CHAN | IGES TO OFFICERS A | ND DIRECTORS IN | 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD ANDERS, JEFFERY PO BOX 149 JENNINGS, FL 32053 | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D/T RIGBY, CHARLES 6159 NW 31st C | CIR. | ☐ Change | Addition | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOLLINGSWORTH, ROY 6083 NW 37TH DRIVE | | ☐ Delete | TITLE NAME | JENNINGS FL 3 2 D | 2003 | ☐ Change | | | |
| DITT OT ZII | JASPER EL 32052 | | | STREET ADDRESS | SNOW, LAUREN 6243 NW 31st C | | _ 0.2.90 | Addition | | |
| TITLE NAME STREET ADDRESS CITY-SI-7IP | JASPER, FL 32052 D HIGGINS, FRED 6508 NW 31ST CIRCLE IENNINGS EL 32053 | | ₩ Delete | CITY-ST-ZIP TITLE NAME STREET ADDRESS | 6243 NW 31st C JENNINGS FL 32 D FOREMAN, CYNTH 6186 NW 31st C | 2053 HIA CIR. | Change | Addition | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | D HIGGINS, FRED 6508 NW 31ST CIRCLE JENNINGS, FL 32053 VPD ANDERS, JEFFREY PO BOX 149 | | Delete | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | 6243 NW 31st C JENNINGS FL 32 D FOREMAN, CYNTH 6186 NW 31st C JENNINGS FL 32 D/S NEELY, KATHLEE 81 W.A. ROGERS | 2053 HIA CIR. 2053 EN 5 RD. | ······· | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | D HIGGINS, FRED 6508 NW 31ST CIRCLE JENNINGS, FL 32053 VPD ANDERS, JEFFREY | | | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | 6243 NW 31st C JENNINGS FL 32 D FOREMAN, CYNTH 6186 NW 31st C JENNINGS FL 32 D/S NEELY, KATHLEE | 2053 HIA CIR. 2053 EN S RD. L 32344 DSEPH | ☐ Change | ☐ Addition | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP | D HIGGINS, FRED 6508 NW 31ST CIRCLE JENNINGS, FL 32053 VPD ANDERS, JEFFREY PO BOX 149 JENNINGS, FL 32053 D TAITT, JAMES 3285 NW CR 141 | | ☑ Delete ☑ Delete ☑ Delete | CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | 6243 NW 31st C JENNINGS FL 32 D FOREMAN, CYNTH 6186 NW 31st C JENNINGS FL 32 D/S NEELY, KATHLEE 81 W.A. ROGERS MONTICELLO, FI D WASHINGTON, JC 6697 NW CR 152 JENNINGS FL 32 V/D FENNER JR., CAI 323 SE BRANDON LAKE CITY, FL | 2053 HIA CIR. 2053 EN 5 RD. 5 32344 DSEPH 2053 EVIN L. 1 | Change Change | Addition Addition Addition | | |

ALIACHMENT

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

| 1. Entity Name | MEN I # N32522 AKE PROPERTY OWNER | RS' ASSOCIATION, INC | : . | | | | | | | |
|---|--|---|-------------|--|-------------|--------------------------------------|-------------------|-------------------|-----------------------------------|-------------------------|
| Principal Place of Business Mailing Address P.O. BOX 65 JENNINGS, FL 32053 Mailing Address P.O. BOX 65 JENNINGS, FL 32053 | | | | | | AC | 021 | 810 | | |
| Principal Place of Business | | | | | | | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 01182006 | Chg-NP | CR2E037 (| 11/05) | |
| City & State | | City & State | | | | FO 2000000 | | | | olied For Applicable |
| Zip | Country Zip | | Cou | Country | | 5. Certificate of Status Desired | | | \$8.75 Additional Fee Required | |
| | 6. Name and Address of Curren | nt Registered Agent | | | J | 7. Name and A | ddress of New | | | |
| BULLARD, | | | | Name | | | | | | |
| LIVE OAK, | H OHIO AVENUE FL 32064 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | City | | | | | Zip Code | |
| A. The above | named entity submits this statement | for the nurnose of changing its re | nietor | 1 | ragistor | ed agent, or both | in the State of E | FL am fam | • | |
| SIGNATURE | ions of registered agent. Signature, typed or printed name of registered age | nt and title if applicable. (NOTE: f | Registere | d Agent signetur | re required | when reinstating) | | DATE | | |
| | Filing Fee is \$61.25 Due by May 1, 2006 | 9. Election Camp Trust Fund Co | _ | | | \$5.00 May Be Added to Fees | | Make check partme | | |
| 10. | OFFICERS AND C | | 11. | | | ADDITIONS/CHAP | NGES TO OFFIC | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | ANDERS, JEFFERY PO BOX 149 JENNINGS, FL 32053 | ☐ Delete | | | 6694 | ONALD, CUR 4 NW 31st NINGS, FL | CIR. | L |) Change | ★ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOLLINGSWORTH, ROY 6083 NW 37TH DRIVE JASPER, FL 32052 | Delete | | | 6694 | ONALD, DEI 4 NW 31st NINGS, FL | CIR. | |] Change | ⊠ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HIGGINS, FRED 6508 NW 31ST CIRCLE JENNINGS, FL 32053 | Delete | | | | | | | Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPD ANDERS, JEFFREY PO BOX 149 JENNINGS, FL 32053 | ☐ Delete | 1 | · I | | | | |] Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D TAITT, JAMES 3285 NW CR 141 JENNINGS, FL 32053 | Oelete | | | | | | C |] Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D EHLERT, ROGER 6727 NW 31ST CIRCLE JENNINGS, FL 32053 | □ Delbte | | | | | | | Change | Addition . |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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, Porida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other file empowered. | | | | | | | | | | |
| SIGNAT | FURE: CHARLES W. RI | GBY (SALLA PRINTED NAME OF SIGNING OFFICER O | R DUREC | TOR | _ | 2/26/ | /U6 - Date | (386) 93 | 8–579 | 1 |