2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N34858

Entity Name: SYLVAN LAKES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3922 58TH CIRCLE
VERO BEACH, FL 32966 US

New Principal Place of Business:

Current Mailing Address:

WILLIAM P. DUNCOMBE
3922 58TH CIRCLE
VERO BEACH, FL 32966 US

New Mailing Address:

FEI Number: 65-0155123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EVANS, RALPH L
3355 OCEAN DR
VERO BCH, FL 32963 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:	DUNCOMBE, WILLIAM P	
Address:	3922 58TH CIRCLE	
City-St-Zip:	VERO BEACH, FL 32966	
Title:	T	( ) Delete
Name:	STRICKLAND, MICHAEL	
Address:	5875 39TH LANE	
City-St-Zip:	VERO BEACH, FL 32966	
Title:	VP	( ) Delete
Name:	MORBY, STEPHANIE	
Address:	5895 40TH LANE	
City-St-Zip:	VERO BEACH, FL 32966	
Title:	D	( ) Delete
Name:	ANDERSON, BILL	
Address:	3940 58TH CIRCLE	
City-St-Zip:	VERO BEACH, FL 32966	
Title:	S	( ) Delete
Name:	FOSTER, JOAN	
Address:	5845 40TH LANE	
City-St-Zip:	VERO BEACH, FL 32966	
Title:	D	(X) Delete
Name:	DUNCOMBE, KATHY	
Address:	3922 58TH CIRCLE	
City-St-Zip:	VERO BEACH, FL 32966	

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:	
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: WILLIAM P. DUNCOMBE PRES 04/30/2007

Electronic Signature of Signing Officer or Director — Date