## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35749

FILED Apr 28, 2008 Secretary of State

Entity Name: FALLING WATERS I, INC. **Current Principal Place of Business: New Principal Place of Business:** 2202 HIDDEN LAKE DRIVE NAPLES, FL 34112 **Current Mailing Address: New Mailing Address:** COLLIER FINANCIAL, INC. 4985 TAMIAMI TRAIL E. NAPLES, FL 34113 FEI Number: 65-0161654 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: HART, STEPHEN P COLLIER FINANCIAL INC 4985 E TAMIAMI TR NAPLES, FL 34113 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: ( ) Delete () Change () Addition VOKOVICH, GENESTA Name: Name: Address: 30 BLUE LANTERN DR Address: City-St-Zip: SALEM, OH 44460 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: LEE, THOMAS Name: Address: 2202 HIDDEN LAKE DR APT #7 Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip: Title: DST () Delete Title: () Change () Addition BURNS, EDWIN Name: Name: 2462 HIDDEN LAKE DR, UNIT #7 Address: Address: City-St-Zip: NAPLES, FL 34112 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: TOM LEE PD 04/28/2008