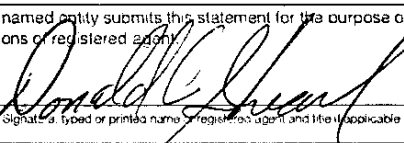


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90367 012 ****61.25

DOCUMENT # N37157 1. Entity Name PINE LAKE OF LAKELAND MOBILE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business ATTN: KEITH YOST 7805 US 98 N.#43 LAKELAND, FL 33809			Mailing Address ATTN: KEITH YOST 7805 US 98 N.#43 LAKELAND, FL 33809		
2. Principal Place of Business - No P.O. Box # ATTN: DONALD SHEARL Suite, Apt. #, etc. 7805 US 98 N #27		3. Mailing Address Suite, Apt. #, etc. 7805 US 98 N #27			
City & State Lakeland, FL		City & State Lakeland FL		4. FEI Number 59-2998066	
Zip 33809		Country POLK		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ENGLAND, WANDA 7805 US 98 N. LOT 19 LAKELAND, FL 33809			7. Name and Address of New Registered Agent Name DONALD SHEARL Street Address (P.O. Box Number is Not Acceptable) 7805 N US 98 #27 City Lakeland FL Zip Code 33809		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE <u>3-7-07</u> (NOTE: Registered Agent signature required when constituting)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME YOST, KEITH STREET ADDRESS 7805 US 98 N, #43 CITY-ST-ZIP LAKELAND, FL 33809	☒ Delete		TITLE PD NAME DONALD SHEARL STREET ADDRESS 7805 US 98 N #27 CITY-ST-ZIP LAKELAND, FL 33809	☒ Change ☐ Addition	
TITLE VD NAME SHEARL, DONALD STREET ADDRESS 7805 US 98 N, #27 CITY-ST-ZIP LAKELAND, FL 33809	☒ Delete		TITLE VD NAME MARY JOHNSON STREET ADDRESS 7805 US 98 N #88 CITY-ST-ZIP LAKELAND, FL 33809	☒ Change ☐ Addition	
TITLE SD NAME YOST, EUNICE STREET ADDRESS 7805 US 98 N, #43 CITY-ST-ZIP LAKELAND, FL 33809	☒ Delete		TITLE SD NAME ELEANOR GUSTAVSEN STREET ADDRESS 7805 US 98 N #8 CITY-ST-ZIP LAKELAND, FL 33809	☒ Change ☐ Addition	
TITLE TD NAME VERNON, JOHN STREET ADDRESS 7805 US 98 N CITY-ST-ZIP LAKELAND, FL 33809	☒ Delete		TITLE TD NAME DAWN REED STREET ADDRESS 7805 US 98 N #88 CITY-ST-ZIP LAKELAND, FL 33809	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Eleanor Gustavsen (Eleanor Gustavsen)</u> <u>3-5-07 863-853 4490</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					