## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

| DOCUMENT # N40814  1. Entity Name  |   |   |                              |  |  |  |  | FILED  |   |  |  |  |  |
|--|---|---|------------------------------|--|--|--|--|--|---|--|--|--|--|
| 1. Entity Name-<br>PRIMERA OWNER'S ASSOCIATION, INC.   |   |   |                              |  |  |  |  | <b>^7</b>  | -   | _  |  |  |  |
|  |   |   |                              |  |  |  |  | 07   | MAY 25 F  | 'ff 3:   | 13   |  |  |
| Principal Place of Business Mailing Address  |   |   |                              |  |  | <del></del>  |  |  |   | ā slā  | TE.  |  |  |
| 120 E COLON<br>ORLANDO, FI   |   | 120 E COLONIAL DR<br>Orlando, Fl. 32801 US                                  |                              |  |  | İ  | + Al.  | AHASSFÉ  | , Et OR   | IDA  |  |  |  |
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| 2. Principal Place of Business - No P.O. Box #   |   |   | 3. Mailing Address           |  |  |  |  |  |   |  |  |  |  |
| Suite, Apt. #, etc.  |   |   | Suite, Apt. #, etc.          |  |  |  |  | 05172007   | Chg-NP  | CR2E0  | 27 (42)  | 06)  |  |
| City & State   |   |   | City & State                 |  |  |  |  | 4. FEI Number  |   | CRZEU  | 37 (12   | Applied For  |  |
|  |   |   | ,                            |  |  |  | NOT APPLICABLE Not A   |  |   | Not Applicable   |  |  |  |
| Zip Country  |   |   | Zip Co                       |  |  | untry  | 5. Certificate of Status Desired \$8.75 Additional Fee Required  |  |   |  |  |  |  |
| 6. Name and Address of Current Registered Agent  |   |   |                              |  |  | Name   |  | 7. Name and Ad   | dress of New R  | egistered  | Agent  |  |  |
| PALMETTO<br>150 MAGN   |   | ER SERVICES, INC.   |                              |  |  |  | ress (F  | O. Box Number is   | Not Acceptable  | <u>,,                                    </u>  |  |  |  |
| DAYTONA  |   |   |                              |  |  |  |  |  |   |  |  |  |  |
|  |   |   |                              |  |  | City   |  |  |   |  | Zin  | Code   |  |
| 8. The above   | named entit   | v submits this statement for  | the purpose                  | of changing its                                | register   | 1  | oister   | dod to Joens he  | n the State of Flo  | FL   | <b>.</b>   `   |  |  |
| 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. Lam Jamiliar with, and accept the obligations of registered agent.  100/06/0701033019 **61.25  |   |   |                              |  |  |  |  |  |   |  |  |  |  |
| SIGNATURE .  |   |   |                              |  |  |  |  |  | 7010  | ,55 0  | 1.5  | ***01.23   |  |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renstating)  DATE  |   |   |                              |  |  |  |  |  |   |  |  |  |  |
|  | Amended   | I AR is \$61.25   |                              | 9. Election Can                                | npaign F   | inancing   |  | \$5.00 May Be  | M   | ake chec   | k navai  | bla to   |  |
|  |   |   | 1                            | Trust Fund C                                   | Contribut  | tion.  | }  | Added to Fees  |   | ida Depa   |  |  |  |
| 10.  |   | OFFICERS AND DIR  | ECTORS                       |  | Contribut  |  | <del> </del>   |  | Flor  | ida Depa   | rtment   | of State   |  |
| 10.<br>TITLE<br>NAME   | PD<br>ACTON,  | OFFICERS AND DIR  | ECTORS                       | Trust Fund C                                   |  | E 1  | VPI  | Added to Fees DDITIONS/CHANG   | Flor<br>GES TO OFFICE   | ida Depa   | RECTO  | of State   |  |
| TITLE<br>NAME<br>STREET ADDRESS  | ACTON, .<br>2400 DIX  | OFFICERS AND DIR  | ECTORS                       |  | 11.<br>TITLI<br>NAM<br>STRE  | E TADORESS   | VPI<br>Whi   | Added to Fees  DDITIONS/CHANG  DUNCAR  Primera   | Fior  | ida Depar<br>RS AND DI<br>Suit   | RECTO  | of State RS IN 10 ange X Addition  |  |
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