2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 24, 2006 8:00 am Secretary of State DOCUMENT # N47748 1. Entity Name 04-24-2006 90456 033 ****61.25 LAKE LOUISA & LAKE NELLIE OAKS HOMEOWNERS' ASSN., INC. Principal Place of Business Mailing Address P.O. BOX 120561 CLERMONT FL 34712 P.O. BOX 120561 CLERMONT FL 34712 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-3122921 Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Ron Laliberte LAUN, GREG Street Address (P.O. Box Number is Not Acceptable) 11500 NELLIE OAKS BEND CLERMONT FL 34711 11629 Nellie Oaks Bend Zip Code **34-7//** Clermont 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Ronald Laliberte | 1629 Nellie Oaks Bend TITLE Addition TITLE Delete LAUN, GREG NAME NAME STREET ADDRESS 11500 NELLIE OAKS BEND STREET ADDRESS clermont, Florida CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP TITLE ■ Delete TITLE John Cavanagh 11634 Nellie Oaks Bend Clerinont, Fli 34711 ☐ Change **X** Addition CLARK, SCOTT NAME NAME 11520 NELLIE OAKS BEND STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition TITLE □ Deleje TITLE HEFFRON, NORMA NAME NAME 9035 MOSSY OAK LAKE STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CLERMONT FL 34711 CITY-ST-ZIP **Addition ⊠** Delete □ Change TITLE TITLE David Koepsell NAME PORTER, RENCHELLE NAME 9116 MOSSY OOK Lane 11525 NELLIE OAKS BEND STREET ADDRESS STREET ADDRESS clermont, F1 34711 CITY-ST-ZIP CLERMONT FL 34711 CITY-S1-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition BUCHANAN, DEVON NAME NAME 9110 MOSSY OAK LANE STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE DOOLAN, TOM NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

11601 NELLIE OAKS BEND

CLERMONT FL 34711