2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9200000062

FILED Apr 16, 2006 Secretary of State

Entity Name: LAKE WASHINGTON OAKS HOMEOWNERS' ASSOCIATION, INC.

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--|--|---------------------------------------|---|--|
| P.O. BOX 3 MELBOUR | 860771 NE, FL 32936 | US | P.O. BOX 3 MELBOUR | 360458 NE, FL 32936 US |
| Current Mailing Address: | | | New Mailing Address: | |
| P.O. BOX 3 MELBOUR | 860771 NE, FL 32936 | US | P.O. BOX 3 MELBOUR | 360458 NE, FL 32936 US |
| FEI Number: | 59-3151141 | FEI Number Applied For () FEI Number | mber Not Appl | icable () Certificate of Status Desired () |
| Name and | Address of Cu | rrent Registered Agent: | Name and | Address of New Registered Agent: |
| | TIC WAY NE, FL 32935 | US | CALABRESE, GRAIG 1674 RUSTIC WAY MELBOURNE, FL 32935 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: GRAIG A CALABRESE 04 | | | | 04/16/2006 |
| Electronic Signature of Registered Agent | | | | Date |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | SD () E LE KARCZYK, RO 1666 RUSTIC WA MELBOURNE, FL | 4Υ | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | D () C CASTILLE, DONA 1642 RUSTIC WA MELBOURNE, FL | λΥ | Title: Name: Address: City-St-Zip: | D (X) Change () Addition CAISANGO, THOMAS 1635 RUSTIC WAY MELBOURNE, FL 32935 |
| Title: Name: Address: City-St-Zip: | TD () E WIDENER, KIM 1650 RUSTIC WA MELBOURNE, FL | | Title: Name: Address: City-St-Zip: | TD (X) Change () Addition CALABRESE, GRAIG 1650 RUSTIC WAY MELBOURNE, FL 32935 |
| Title: Name: Address: City-St-Zip: | VD () E TAYLOR, RONAL 1695 RUSTIC WA MELBOURNE, FL | λΥ | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | PD () E DURRANCE, PAU 1694 RUSTIC WA MELBOURNE, FL | 4Y | Title: Name: Address: City-St-Zip: | ()Change()Addition |
| | | | | |

I hereby certify that the information supplied with this filing does not qualify for the 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: GRAIG A CALABRESE TD 04/16/2006