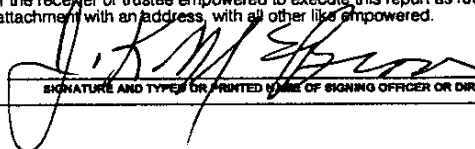


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

02-12-2007 90069 050 ****61.25

DOCUMENT # N94000003682 1. Entity Name NORSTAR COVE VILLAS I ASSOCIATION, INC.					
Principal Place of Business 4508 MYRTLE BEACH DR SEBRING, FL 33872 US			Mailing Address 4508 MYRTLE BEACH DR SEBRING, FL 33872 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0582188	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MCBROOM, JERRY 3911 CATALINA DR SEBRING, FL 33872				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
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 NAME STREET ADDRESS CITY-ST-ZIP	P MCBROOM, JERRY 3911 CATALINA DR SEBRING, FL 33872 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOWARD, AL 3807 CATALINA DR SEBRING, FL 33872 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WAKEFIELD, SALLY 3765 CATALINA DR SEBRING, FL 33872 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MIZE, BOB 3919 CATALINA DR SEBRING, FL 33872 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GARDNER, VIVIAN 3923 CATALINA DR SEBRING, FL 33872 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARDNER, VIVIAN 3923 CATALINA DR SEBRING, FL 33872 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWANKE, BOB 3761 CATALINA DR SEBRING, FL 33872 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WAKEFIELD, SALLY 3765 CATALINA DR SEBRING, FL 33872 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOGART, KAREEN 3813 CATALINA DR SEBRING, FL 33872 ☐ 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: 			J.K. McBroom 2-9-07 863-385-7656 DATE DAYTIME PHONE #		