2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2007
Secretary of State

DOCUMENT# N96000005013

Entity Name: PAMALA OAKS PHASE II HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

126 HOLLOWAY CT
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

126 HOLLOWAY CT
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 57-1059722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CAGLIN, SUSAN
126 HOLLOWAY CT
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ZADOW, ELAINE
Address: 108 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

Title: S ( ) Delete
Name: MASTERJOHN, JODI
Address: 110 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete
Name: GORDON, EUSTIS
Address: 120 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

Title: TS ( ) Delete
Name: CAGLIN, SUSAN
Address: 123 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: PARKER, JOHN
Address: 112 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

Title: TS (X) Change ( ) Addition
Name: LORITZ, MARYANN
Address: 102 HOLLOWAY CT
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify 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: SUSAN CAGLIN TS 05/29/2007

Electronic Signature of Signing Officer or Director — Date