2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

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Entity Name: LAKE CRESCENT PINES EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

New Principal Place of Business:

P.O. BOX 121628
CLERMONT, FL 347121628 US

Current Mailing Address:

8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

New Mailing Address:

P.O. BOX 121628
CLERMONT, FL 347121628 US

FEI Number: 59-3426910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FURLOW, REBECCA
LELAND MANAGEMENT
8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

WILLIAM, OLSON PRES
LAKE CRESCENT PINES EAST HOMEOWNERS ASSOC.
10743 ARIA COURT
CLERMONT, FL 34711 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: WILLIAM OLSON 04/29/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COLBERT, JAMES
Address: 10648 CRESCENT LOOP
City-St-Zip: CLERMONT, FL 34711

Title: VPD ( ) Delete
Name: BOYER, ALAN
Address: 11816 CARUSO DR.
City-St-Zip: CLERMONT, FL 34711

Title: S ( ) Delete
Name: BOYER, JOANN
Address: 11816 CARUSO DR.
City-St-Zip: CLERMONT, FL 34711 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OLSON, WILLIAM
Address: 10743 ARIA COURT
City-St-Zip: CLERMONT, FL 34711

Title: VPD (X) Change ( ) Addition
Name: SORENSEN, WALLY
Address: 10718 ARIA COURT
City-St-Zip: CLERMONT, FL 34711

Title: S (X) Change ( ) Addition
Name: LUNDAY, TRISH
Address: 10808 ARIA COURT
City-St-Zip: CLERMONT, FL 34711 US

Title: T ( ) Change (X) Addition
Name: HELM LYONS, HELENA
Address: 10741 SIENA DRIVE
City-St-Zip: CLERMONT, FL 34711

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: HELENA HELM LYONS T 04/29/2006
Electronic Signature of Signing Officer or Director Date