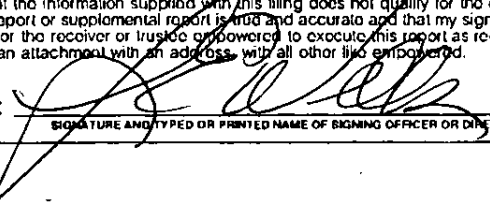


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 16, 2007 8:00 am
Secretary of State

07-11-2007 90079 034 ****61.25

DOCUMENT # N97000004521						7/1	
1. Entity Name CANNON CREEK AIR ESTATES-NORTHERN APPROACHES HOMEOWNERS' ASSOCIATION, INC.							
Principal Place of Business CANNON CREEK AIRPARK 207 SW CONFEDERATE GLEN LAKE CITY FL 32025				Mailing Address CANNON CREEK AIRPARK 207 SW CONFEDERATE GLEN LAKE CITY FL 32025			
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 59-2532222				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent WELLS, JACK 207 SW CONFEDERATE GLEN LAKE CITY FL 32025				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 need not be a duplicate (NOTE: Registered Agents separating required when necessary) DATE							
FILE NOW: FEE IS \$81.25 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			
FILE NAME STREET ADDRESS CITY ST ZIP	P WELLS, JACK 207 SW CONFEDERATE GLEN LAKE CITY FL 32025	☐ Delete		FILE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition		
FILE NAME STREET ADDRESS CITY ST ZIP	ST WELLS, JUDITH K 207 SW CONFEDERATE GLEN LAKE CITY FL 32025	☐ Delete		FILE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition		
FILE NAME STREET ADDRESS CITY ST ZIP	D KNEPPAR, RAY 417 SW ROCKHEED LANE LAKE CITY FL 32025	☐ Delete		FILE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition		
FILE NAME STREET ADDRESS CITY ST ZIP		☐ Delete		FILE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition		
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FILE NAME STREET ADDRESS CITY ST ZIP		☐ Delete		FILE 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 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 embossed.							
SIGNATURE: 				08/13/07 386-792411 Date Daytime Phone #			