2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N98000005948

Entity Name: ANSON ACRES LOT OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

31510 ANSON RD
MYAKKA CITY, FL 34251

New Principal Place of Business:

Current Mailing Address:

31510 ANSON RD
MYAKKA CITY, FL 34251

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, HARRY L
31510 ANSON RD
MYAKKA CITY, FL 34251 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: PD ( ) Delete
Name: COSTA, HILARIO S
Address: 2610 RANCH CLUB BLVD
City-St-Zip: MYAKKA CITY, FL 34251

Title: SD ( ) Delete
Name: JIMENEZ, PAT
Address: 4234 PALACIO DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: D ( ) Delete
Name: LEWIS, HARRY
Address: 31510 ANSON ROAD
City-St-Zip: MYAKKA CITY, FL 34251

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: HARRY L LEWIS DIR 04/30/2007
Electronic Signature of Signing Officer or Director — Date