2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006920

FILED May 01, 2006 Secretary of State

Entity Name: MANCHESTER AT KINGS RIDGE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 W SR 434, SUITE 5000 LONGWOOD, FL 327795044 **Current Mailing Address: New Mailing Address:** 2180 W SR 434, SUITE 5000 LONGWOOD, FL 327795044 FEI Number: 59-3577472 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: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT INC. 2180 W SR 434, SUITE 5000 LONGWOOD, FL 327795047 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SANTEE, DONALD W AUDET, EMILE JR Name: Name: 3804 EVERSOLT STREET Address: 3887 EVERSOLT STREET Address: CLERMONT, FL 34711 City-St-Zip: City-St-Zip: CLERMONT, FL 34711 Title: () Delete Title: () Change () Addition WARR, CAROLINE Name: Name: Address: 3591 EVERSHOLT STREET Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: VPD () Delete Title: PD (X) Change () Addition PROUT, OTTILIE PROUT, OTTILIE Name: Name: 3857 EVERSHOLT ST 3857 EVERSHOLT ST Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 () Delete Title: SD Title: () Change () Addition Name: APFELBECK, RHODA Name: Address: 3791 EVERSHOLT STREET Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition CLARK, GARY Name: Name: CLARK, GARY 3808 EVERSHOLT STREET 3808 EVERSHOLT STREET Address: Address: City-St-Zip: CLERMONT, FL 34711 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: OTTILIE PROUT PD 05/01/2006