2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002683

FILED Feb 06, 2008 Secretary of State

Entity Name: THE PRESERVE OF DON PEDRO OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
80 S GUL LACIDA,	LF BLVD FL 33946 US	3		
Current Mailing Address:		New Mailing Address:		
O BOX 3 LACIDA,	692 FL 339463692	US		
El Number:	65-0916674	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:
	N4E0 104			
570 VÍRG RLANDO he above	SINIA DR), FL 32814 l named entity su	JS bmits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
he above the State	SINIA DR), FL 32814 l named entity su e of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
570 VIRG PRLANDO he above the State	SINIA DR D, FL 32814 U named entity su e of Florida. RE:			ed office or registered agent, or both, Date
570 VIRG PRLANDC The above In the State	SINIA DR D, FL 32814 U named entity su e of Florida. RE:	ubmits this statement for the positions of the positions of Registered Age	ent	
570 VIRG RLANDC he above i the State	on FL 32814 In the second seco	bmits this statement for the positions statement for the positions of Registered Age ORS: Delete	ent	Date
570 VIRG PRLANDO he above i the State IGNATUF PFFICERS ttle: ame: ddress:	inia DR p, FL 32814 L named entity sue of Florida. RE: Electronic S AND DIRECT PD () E WADE, JAMES W PO BOX 454 PLACIDA, FL 33	Delete D W	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: DONALD W MILROY TD 02/06/2008