.2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Secretary of State DOCUMENT # S28045 03-27-2007 90018 020 ***150.00 1. Entity Name DAVENPORT ESTATES ASSOCIATION, INC. Principal Place of Business Mailing Address 40042731 **DAVENPORT ESTATES** DAVENPORT ESTATES 2900 POWERLINE RD 2900 POWERLINE RD HAINES CITY, FL 33844 HAINES CITY, FL 33844 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01132007 Cha-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 59-3056917 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'BRYAN, SALLY Street Address (P.O. Box Number is Not Acceptable) LOT 179 DAVENPORT RV RESORT 2900 POWERLINE ROAD HAINES CITY, FL 33844 City 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 and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOWIN FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Pres, D ☐ Delete TITLE Change : Addition NAME WITT, LARRY Witt Larry NAME 2900 Powerline Rd fot 141 STREET ADDRESS 2900 POWERLINE RD, LOT 141 STREET ADDRESS Haines City FL 33844 CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP Delete TITLE TITLE Vice P, D ☐ Change Addition Grottendick Betty NAME REID, LARRY R NAME STREET ADDRESS 2900 POWERLINE RD, LOT 102 2900 Powerline Rd lot 33. STREET ADDRESS Haines City FL 33844 CITY-ST-ZIP HAINES CITY, FL 338449063 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition Oir. REAGAN, JAMES G NAME NAME Whiteman Neison STREET ADDRESS 2900 POWERLINE RD, LOT 192 2900 Powerline Rd STREET ADDRESS Haines City FL 33844 CITY-ST-7IP HAINES CITY, FL 33844 CITY-ST-7IP TITLE SD ☐ Delete TITLE (Z) Change ☐ Addition HARRISON, KAYE H NAME NAME Harrison Kaye H STREET ADDRESS 2900 POWERLINE RD, LOT 10 2900 Powerline Rd. lot 10 STREET ADDRESS Haines City FL 33844 HAINES CITY, FL 33844 CITY-ST-ZIP CITY-ST-ZIP Delete Addition TITLE TITLE Sec. , Dir ☐ Change DERRENBACHER, COLLEEN A NAME NAME Van winkle Patricia L STREET ADDRESS 2900 POWERLINE RD. STREET ADDRESS 2900 PowerLine Rd. lot 30 Haines City FL 33844 CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-7IP TITLE ☐ Delete Change TITLE ☐ Addition Tres. Dir. JACKSON, DAVE NAME Jackson David J STREET ADDRESS 2900 POWERLINE RD, LOT 32 STREET ADDRESS 2900 Powerline Rd, lot 32 Haines City FL 33844 CITY-ST-7IP City-St-70P HAINES CITY, FL 33844 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED Mar 27, 2007 8:00 am ATTACHMENT 40042731

David J Jackson 2900 Powerline Rd. lot 32 Haines City FL 33844

President of Davenport estates association Inc. March $23\ 2007$

To whom it may concern Dear Sir/Madam

. . . •

In our association we have 7 (seven) directors but only 6 (six) are on the Document # S28045 how do we add the other director

Thanks for your help

David Jackson