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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734976

1. Corporation Name

LAKE HOWARD TERRACE CONDOMINIUM ASSOCIATION, INC

Principal Place of Business
**208 E LAKE HOWARD DRIVE
WINTER HAVEN FL 33881**

Mailing Address
**208 E LAKE HOWARD DRIVE
WINTER HAVEN FL 33881**

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100055 - 90022 - 13



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/18/1976	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1881821	
24 Country		29 Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
26		31		Trust Fund Contribution	

9. Name and Address of Current Registered Agent

**EITNIER, DALE
208 E LAKE HOWARD DR #203
WINTER HAVEN FL 33881**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Dale Eitnier
Signature, typed or printed name of registered agent and title if applicable

DALE EITNIER

1/5/99

DATE

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	EITNIER, DALE	1.2 NAME	EITNIER, DALE
STREET ADDRESS	208 E LAKE HOWARD DR, #203	1.3 STREET ADDRESS	208 E. LAKE HOWARD DR.
CITY-ST-ZIP	WINTER HAVEN, FL 00000	1.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	VD	2.1 TITLE	VD
NAME	SCHNEIDER, VICTOR	2.2 NAME	SCHNEIDER, VICTOR
STREET ADDRESS	208 E LAKE HOWARD DR	2.3 STREET ADDRESS	208 E. LAKE HOWARD DR.
CITY-ST-ZIP	WINTER HAVEN, FL 00000	2.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	TD	3.1 TITLE	STD
NAME	ROHRBACH, MARY P.	3.2 NAME	ROHRBACH, KARL K.,SR.
STREET ADDRESS	208 E LAKE HOWARD DR.	3.3 STREET ADDRESS	208 E. LAKE HOWARD DR.
CITY-ST-ZIP	WINTER HAVEN FL	3.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	SD	4.1 TITLE	D
NAME	CARSON, MANELLE	4.2 NAME	WILLIAMS, CYNTHIA
STREET ADDRESS	208 E LAKE HOWARD DR.	4.3 STREET ADDRESS	208 E. LAKE HOWARD DR.
CITY-ST-ZIP	WINTER HAVEN FL	4.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	D	5.1 TITLE	D
NAME	FARMER, ROBERT	5.2 NAME	FARMER, ROBERT
STREET ADDRESS	208 E. LAKE HOWARD DRIVE	5.3 STREET ADDRESS	208 E. LAKE HOWARD DR.
CITY-ST-ZIP	WINTER HAVEN FL	5.4 CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dale Eitnier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DALE EITNIER 1/5/99 (941)2992442

Date

Daytime Phone #

CR2E037 (11/98)