


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # 747485
1. Entity Name
GREENWOOD LAKES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
113 DUBLIN DRIVE **P O BOX 950293**
LAKE MARY, FL 32746 US **LK MARY, FL 32795 US**



01132005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2059327** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CRAMER, JUDY K
113 DUBLIN DR
LAKE MARY, FL 32746

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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 *Judy Cramer Treasurer* *Judy Cramer* *1-13-05*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	BOWERS, RENE
STREET ADDRESS	110 ERIN CT
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	PD
NAME	JAMSKI, DEBBIE
STREET ADDRESS	168 DUBLIN DRIVE
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	TD
NAME	CRAMER, JUDY
STREET ADDRESS	113 DUBLIN DR
CITY-ST-ZIP	LK MARY, FL 32746
TITLE	VD
NAME	JOCKIN, ARTHUR
STREET ADDRESS	269 DUBLIN DRIVE
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	D
NAME	MANFREDI, FRANK
STREET ADDRESS	121 ERIN COURT
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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1100000183841
01/20/05-80006-011 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judy Cramer Judy Cramer - Treasurer* *1-13-05* *407-324-7553*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

rd. 1-13-05 # 1910