

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2006 NOV -9 PM 12:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N01000005868			
1. Entity Name LONG LAKE RANCHES HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 1145 SAWGRASS CORP PKWY CORAL SPRINGS, FL 33071-6039		Mailing Address 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS, FL 33071-6039	
2. Principal Place of Business		3. Mailing Address 1145 Sawgrass Corp Pkwy	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Sunrise Fl	
Zip	Country	Zip	Country
33323	US	33323	US
4. FEI Number 65-1148121		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KLEIN, SACHS S 301 YAMATO RD SUITE 4150 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name: Katzman + Korr PA Street Address (P.O. Box Number is Not Acceptable): 1501 NW 49 St. Suite 202 City: Ft. Lauderdale FL Zip Code: 33309	
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 a registered agent.			
SIGNATURE:		Ferren L. Korr, Esq. DATE: 11/6/06	
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD	NAME: BRANNER, LAURIE	TITLE: P	NAME: Rudy Renaud
STREET ADDRESS: 1145 SAWGRASS CORP PKWY	CITY-ST-ZIP: FORT LAUDERDALE, FL 33323	STREET ADDRESS: 1145 Sawgrass Corp Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
TITLE: VPD	NAME: OSTROW, JEFF	TITLE: TD	NAME: Guillermo Martinez
STREET ADDRESS: 1145 SAWGRASS CORP PKWY	CITY-ST-ZIP: FORT LAUDERDALE, FL 33323	STREET ADDRESS: 1145 Sawgrass Corp Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
TITLE: SD	NAME: JACOBS, JEFF	TITLE: V.P.D.	NAME: Jeff Jacobs
STREET ADDRESS: 1145 SAWGRASS CORP PKWY	CITY-ST-ZIP: FORT LAUDERDALE, FL 33323	STREET ADDRESS: 1145 sawgrass Corp. Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
TITLE:	NAME:	TITLE: TD	NAME: George Traikos
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS: 1145 Sawgrass Corp Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
TITLE:	NAME:	TITLE: SD	NAME: Pam Cunningham
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS: 1145 Sawgrass Corp Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
TITLE:	NAME:	TITLE: D	NAME: Robert Philipson
STREET ADDRESS:	CITY-ST-ZIP:	STREET ADDRESS: 1145 Sawgrass Corp Pkwy	CITY-ST-ZIP: Sunrise Fl 33323
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 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:		11/1/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

11/13/06