

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 11, 2006
Secretary of State**

DOCUMENT# N05849

Entity Name: LAS PAMPAS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

3418 NW 37TH AVE
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

3418 NW 37TH AVE
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-2634251 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JANOSZ, PETER
3480 NW 37 AVE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JANOSZ, PETER
Address: 3480 NW 37 AVE
City-St-Zip: GAINESVILLE, FL 32605

Title: VD () Delete
Name: LAWRENCE, SHIRLEY
Address: 3468 NW 37TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: T () Delete
Name: WREN, SARAH
Address: 3448 NW 37TH AVE.
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LAWRENCE, SHIRLEY
Address: 3468 NW 37TH AVE.
City-St-Zip: GAINESVILLE, FL

Title: T (X) Change () Addition
Name: JOYCE, JAMES
Address: 3502 NW 37TH AVE.
City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES JOYCE

T

07/11/2006

Electronic Signature of Signing Officer or Director

_____ Date