

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90666 007 \*\*\*\*61.25

**DOCUMENT # N08311**

1. Entity Name

LAKE PICKETT ESTATES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 660216  
CHULUOTA FL 32766

Mailing Address

P.O. BOX 660216  
CHULUOTA FL 32766

94050244



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3440135

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SMITH, KATHIE  
2476 MILLS CREEK ROAD  
CHULUOTA FL 32766

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

*Kathie Smith*

4-8-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME LONGENBACH, RUSSELL  
STREET ADDRESS 2269 MILLS CREEK RD  
CITY-ST-ZIP CHULUOTA FL

TITLE SDT ☐ Delete  
NAME SMITH, KATHIE  
STREET ADDRESS 2476 MILLS CREEK ROAD  
CITY-ST-ZIP CHULUOTA FL

TITLE T ☐ Delete  
NAME DIETRICH, LISA  
STREET ADDRESS 2276 MILLS CREEK ROAD  
CITY-ST-ZIP CHULUOTA FL 32766

TITLE P ☐ Delete  
NAME RAUHOFFER, DON  
STREET ADDRESS 2601 MILLS CREEK ROAD  
CITY-ST-ZIP CHULUOTA FL 32766

TITLE S ☐ Delete  
NAME FORD, GLEN  
STREET ADDRESS 2999 MILLS CREEK ROAD  
CITY-ST-ZIP CHULUOTA FL 32766

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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:

*Lisa M. Dietrich*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Lisa M. Dietrich*

Date

4/8/04

Daytime Phone #

407-365-9347