

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12562

FILED
Mar 02, 2006
Secretary of State

Entity Name: FLAMINGO VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

391 FLAMINGO RD., N.E.
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

391 FLAMINGO RD., N.E.
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 59-2935713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRIGER, CLOYD P
395 FLAMINGO RD NE9Y
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

ROCKEY, CLARENCE J
391 FLAMINGO RD NE
LAKE PLACID, FL 33852 US

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: CLARENCE J ROCKEY

03/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARRINGER, CLOYD
Address: 395 FLAMINGO RD NE
City-St-Zip: LAKE PLACID, FL

Title: STD () Delete
Name: ROCKEY, CLARENCE J
Address: 391 FLAMINGO RD., N.E.
City-St-Zip: LAKE PLACID, FL 33852

Title: VD () Delete
Name: DEDECKER, HENRY
Address: 387 FLAMINGO RD. N.E.
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEDECKER, HENRY
Address: 387 FLAMINGO RD NE
City-St-Zip: LAKE PLACID, FL

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

Title: VD (X) Change () Addition
Name: DOUGHERTY, MICHAEL
Address: 385 FLAMINGO RD. N.E.
City-St-Zip: LAKE PLACID, FL 33852

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: CLARENCE J ROCKEY

STD

03/02/2006

Electronic Signature of Signing Officer or Director

Date