FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

APPROVED AND FILED
1995 MAY -1 AM 8:35
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N13177** **(3)**

1. Corporation Name
LONG LAKE VILLAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 608526 ORLANDO FL 32860-5526	~~P.O. BOX 608526~~ ~~ORLANDO FL 32860-5526~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/27/1986
3a. Date of Last Report: 03/11/1994
4. FEI Number: 59-2665231 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired XXXXX **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26 2180 WEST SR 434
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 SUITE 5000
City & State 23	City & State 28 LONGWOOD FL
Zip 24 / Country 25	Zip 29 32779-5044 / Country 30 US

9. Name and Address of Current Registered Agent

~~KLUTTS, ALVIN~~
~~7454 GROVEOAK DR.~~
~~ORLANDO FL 32810~~

10. Name and Address of New Registered Agent

81 Name: Roger Thompson
82 Street Address (P.O. Box Number is Not Acceptable): 7412 Little Pond Court
83
84 City: Orlando **FL** 85 Zip Code: 32810

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Roger Thompson — Roger Thompson (NOTE: Registered Agent signature required when reinstating) — 2/5/95 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD STILWELL, EVA 7441 COVINA COURT ORLANDO FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition 500001492965 -05/18/95--01012--025 ****130.00 ****130.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~= DIRECTOR KLUTTS, ALVIN 7454 GROVEOAK DR. ORLANDO FL	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	D XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VPD~~ ~~JOHNSON, CAROL~~ ~~7428 COVINA COURT~~ ~~ORLANDO FL~~	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change XX Addition VICE PRESIDENT Tom Dotson 7421 Covina Court Orlando, FL 32810
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change XX Addition PRESIDENT Roger Thompson 7412 Little Pond Court Orlando, FL 32810
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change X Addition DIRECTOR Margaret Pavlicek 7449 Covina Court Orlando, FL 32810
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD 5-1-95	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Eva M. Stilwell, Sec-Treas — 2/5/95 (Date) — (407) 897-1532 (Daytime Phone #)

EVA M. STILWELL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

000144