

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 15, 2004  
Secretary of State**

DOCUMENT# N26130

Entity Name: LONG LAKE PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5709 LONG PARK COURT  
ORLANDO, FL 32810 US

**New Principal Place of Business:**

**Current Mailing Address:**

5709 LONG PARK COURT  
ORLANDO, FL 32810 US

**New Mailing Address:**

FEI Number: 59-2937914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOWARD, MARK A P.E.  
5803 WAYT COURT  
ORLANDO, FL 32810 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: S ( ) Delete  
Name: FRANQUI, T. MR.  
Address: 6204 BROOKHILL CIRCLE  
City-St-Zip: ORLANDO, FL 32810

Title: T ( ) Delete  
Name: NORMAN, JIM  
Address: 6234 BROOKHILL CIRCLE  
City-St-Zip: ORLANDO, FL 32810

Title: S ( ) Delete  
Name: GREENE, HELEN  
Address: 6161 BROOKHILL CIRCLE  
City-St-Zip: ORLANDO, FL 32810

Title: VP ( ) Delete  
Name: JAMES, KARL  
Address: 6308 BROOKHILL CIRCLE  
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete  
Name: FRANCIS, GEORGE  
Address: 5819 PONDWOOD COURT  
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete  
Name: KELLY, DOUGLAS  
Address: 5819 LOKEY DRIVE  
City-St-Zip: ORLANDO, FL 32810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JIM NORMAN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

T

02/15/2004

\_\_\_\_\_  
Date